DOCUMENT RESUME

ED 022 901 VT 005 600

SERVICES AVAILABLE FOR NURSING CARE OF THE SICK AT HOME. PUBLIC HEALTH SERVICE PUBLICATION, NO. 1265.

Pub Date Jan 66

Note-81p.

Available from-Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402 (FS2.2N93/45/967, $.50).

EDRS Price MF-$0.50 HC Not Available from EDRS.

Descriptors-*COMMUNITY HEALTH SERVICES, COMPANIONS (OCCUPATION), CONTRACTS, GEOGRAPHIC DISTRIBUTION, HEALTH INSURANCE, HOME VISITS, INTERAGENCY COORDINATION, *NATIONAL SURVEYS, NURSES, *NURSING, PHYSICAL THERAPY, PROGRAM COSTS, VISITING HOMEMAKERS

The survey of agencies providing home care conducted on January 1, 1966 by the Division of Nursing showed that almost 70 percent of the population of the United States and essentially all of the population in the territories lived in areas where some type of organized home care nursing services was available. Since 1959, the number of large cities with services had doubled and, since 1963, there had been a rapid increase in the new services in smaller communities. Services were available to 15 percent more population than in 1963 with the greatest increase in the Middle and South Atlantic States. Visiting nurse associations and local official health agencies provided over 90 percent of the services, although only 27 percent of the total of the health agencies furnished home care. Over half of the agencies employed less than five nurses but small agencies were merging. Home health aids were being utilized and the number of physical therapists had doubled since 1963 while nutrition and social services had also increased. In spite of the gains, 55 million people in the United States, primarily in small towns and rural areas, were without provision for home nursing care. The need for an intensive study of home care needs, staff requirements, and related factors was indicated as was the exploration of new patterns of organizing and delivering services. Data relating to cost and payment for services are provided. (JK)

VT005600

SERVICES AVAILABLE

NURSING CARE of the SICK at HOME

[illegible]

U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
Public Health Service

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY.

SERVICES AVAILABLE for NURSING CARE of the SICK at HOME

January 1966

Prepared by Division of Nursing
in cooperation with State and Territorial Directors of Nursing

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE ■ Public Health Service
Bureau of Health Manpower □ Division of Nursing
800 North Quincy Street □ Arlington, Virginia 22203

Public Health Service Publication No. 1265
(Revised 1967)

For sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402
Price 50 cents

Foreword

With the enactment of the Social Security Amendments of 1965 (Public Law 89–97) the demand for nursing care of the sick at home increased markedly, and communities throughout the United States are making every effort to provide the needed services. Current information on the potential resources as well as the nursing services available to care for the sick at home is essential at this time to document trends and analyze changes that are occurring.

The Division of Nursing, Public Health Service, U.S. Department of Health, Education, and Welfare, has collected data on the availability of services for nursing care of the sick at home periodically since 1959. The data from the three previous studies, 1959, 1961, and 1963, were used extensively by the Joint Work Group on Home Health Services in testimony before Congress for the Social Security Amendments of 1965, as well as by State and local agencies to interpret community needs and to plan for nursing services to meet their needs.

The current survey of 1966 represents changes which have taken place throughout the United States in the 2½ years since the July 1963 survey. It demonstrates an expansion of public health nursing programs, an increase in the number of agencies providing services and the use of contractual agreements for payment of patient care. A noticeable trend is the increase in numbers of official agencies providing nursing care of the sick at home. In addition, almost 70 percent of the population, according to the 1960 U.S. Census, now live in areas with some type of organized home nursing services—an increase of about 15 percent since 1963.

The ultimate goal is to assure to all persons nursing care of high quality at home if they should need it and for as long as the need continues. This report shows that the goal can be attained in the not-too-distant future. To do so, however, will require concerted effort in the organization and administration of nursing and related health services, in better coordination and utilization of nurse manpower, and in developing improved methods of reaching those in need who reside in cities, towns, and rural areas of the country.

Jessie M. Scott

Director,
Division of Nursing

Contents

Page

FOREWORD iii

LIST OF FIGURES vi

LIST OF TABLES vii

DEFINITIONS ix

PUBLIC HEALTH SERVICE REGIONS x

INTRODUCTION 1

AVAILABILITY OF SERVICES 3

- AVAILABILITY IN STATES 8
  - Cities and Towns 8
  - Counties 10
  - Cities of 25,000 and Over 10

AGENCIES AND PERSONNEL PROVIDING SERVICES 13

- NURSING PERSONNEL 15
  - Size of Nursing Staff 15
  - Ratio of Nurses to Population Covered 16
- YEAR SERVICES WERE ESTABLISHED 17

PARANURSING AND SUPPORTIVE SERVICES 19

- Number and Types of Professional Services Provided 19
- Personnel 20
- Home Health Aide Service 20
- Homemaker Service 21

COST AND PAYMENT FOR SERVICES 23

- Authority to Collect Fees 23
- Agency Costs and Fees for Services 23
- Agency Cost per Nursing Visit 24
- Contracts for Services 25
- Third-Party Agencies 26

SUMMARY 27

REFERENCES 29

APPENDIX

- Supplementary Tables 33
- Survey Form 68
- Instructions for Completing Form 69

List of Figures

Figure number *Page*

1. Percentage distribution of U.S. population, by availability of nursing services for care of the sick at home in cities, places, and rural areas, January 1, 1966 3
2. Distribution of U.S. population in cities, places, and rural areas, with and without nursing services available, January 1, 1966 4
3. Percentage distribution of population in cities, places, and rural areas with nursing services available for care of the sick at home, January 1, 1966 5
4. Geographic distribution of U.S. population, by availability of nursing services for care of the sick at home, January 1, 1966 6
5. Population distribution: 1960 7
6. States ranked by percentage of population with nursing services for care of the sick at home 9
7. Percentage of counties with nursing services available for care of the sick at home, by Public Health Service Region, July 1963 and January 1966 10
8. Growth in availability of nursing services for care of the sick at home in cities with population of 25,000 and over, 1961–1966 12
9. Distribution of programs for nursing care of the sick at home, by type of agency, January 1, 1966 13
10. Percentage of agency participation in nursing care of the sick at home 13
11. Percentage of nurses employed by local public health agencies providing nursing care of the sick at home 15
12. Distribution of services for nursing care of the sick at home, by size of nursing staff 15
13. Proportion of local public health agencies with services available for nursing care of sick at home, by size of full-time nursing staff 16
14. Accumulative distribution of established home nursing care of the sick programs, by year program was initiated and by type of agency 18
15. Comparison of average cost and full fee charged per nursing home visit, by type of agency 22

List of Tables

Table number — *Page*

1. Distribution of places with nursing services for care of the sick at home, by population groups.............................. 8
2. Population distribution of cities of 25,000 and over with nursing services available for care of the sick at home, 1961, 1963, 1966.. 11
3. Cities of 25,000 population and over having services for nursing care of the sick at home by population range, January 1, 1966... 11
4. Distribution of programs providing complete coverage of population sick at home, by type of agency, July 1963 and January 1, 1966.. 14
5. Ratio of nurse to population coverage in States with agencies providing nursing care of the sick at home.................. 16
6. Number and type of agencies reporting year nursing care of the sick at home was initiated............................... 17
7. Number of paranursing services provided, distributed by type of agency... 19
8. Percentage of agencies with paranursing services other than nursing, by size of nursing staff........................... 20
9. Distribution of home health aide and homemaker services, by type of agency and personnel employed..................... 21
10. Average costs per nursing visit, by agencies in Public Health Service Regions.. 24
11. Average cost per nursing visit, by type and size of agency....... 24
12. Distribution of agencies with contracts for nursing services, by size of staff.. 25
13. Number of contracts with third-party agencies, by type of health agency providing nursing care of the sick at home............ 26
14. Distribution of U.S. population, by availability of nursing services for care of the sick at home, January 1, 1966............. 33
15. Counties in the United States with services for nursing care of the sick at home, January 1, 1966......................... 33
16. Cities of 25,000 population and over with nursing care of the sick at home services, by population range, 1961, 1963, 1966........ 34
17. Distribution of programs for nursing care of the sick at home, by type of agency, January 1, 1966........................... 34

Table number *Page*

18. Distribution of all public health agencies and of those providing nursing care of the sick at home, by type of agency and nursing personnel, January 1, 1966 35
19. Percentage of professional nurses (full and part time) employed in public health, providing nursing services for care of the sick at home, by State, January 1, 1966 36
20. Distribution of agencies providing nursing care of the sick at home, by size of nursing staff, January 1, 1966 37
21. Proportion of local public health agencies with services available for nursing care of the sick by size of full-time nursing staff 37
22. Size of agency nursing staff providing nursing care of the sick at home, by Public Health Service Region, January 1, 1966 38
23. Number of nursing personnel and ratio to U.S. population having nursing care of the sick at home services available, January 1, 1966 39
24. Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966 41

Definitions

CENSUS OF POPULATION

United States: In this report the term "United States" when used without qualifications refers to the 50 States and the District of Columbia, but excludes outlying areas (*7*).

Territories: Refers to the Commonwealth of Puerto Rico, Guam, and the Virgin Islands (*7*).

Cities with 25,000 or more population: Includes 676 cities of 25,000 population or more in the United States as of April 1, 1960 (*8*).

Counties: Includes 3,008 counties; 64 parishes in Louisiana; 24 election districts in Alaska; 32 independent cities in Virginia; Baltimore city, Md.; St. Louis city, Mo.; the District of Columbia; and parts of Yellowstone National Park in Idaho, Montana, and Wyoming (*7*).

Place: Refers to a concentration of population regardless of the existence of legally prescribed limits, powers, or functions. Most of the places listed are incorporated as cities, towns, villages, or boroughs, however. In addition, the larger unincorporated places outside the urbanized areas were delineated and those with a population of 1,000 or more are presented in the same manner as incorporated places of equal size (*7*).

Rural areas: Refers to places with population of less than 2,500 and all other unclassified urban and rural areas.

NURSING SERVICE

Agencies: Includes those agencies providing public health nursing services, categorized by official, visiting nurse service, combination and other nonofficial agencies.

Complete coverage: Refers to nursing service for care of the sick at home provided to all the population residing within the jurisdictional boundaries of the public health agency.

Partial coverage: Refers to nursing services for care of the sick at home provided to persons residing within a designated area of a county or State; i.e., an agency serving the population in a city or town but not that in the surrounding county.

Limited services: Refers to nursing services for care of the sick at home provided to specified categories only; i.e., welfare recipients, patients with selected diagnosis, patients in certain age groups.

Unlimited services: Refers to nursing services for care of the sick at home provided on a continuing basis to all the population without regard to age, diagnosis, or other selected factor.

Public Health Service Regions

REGION

I. Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont

II. Delaware, New Jersey, New York, Pennsylvania

III. District of Columbia, Kentucky, Maryland, North Carolina, Virginia, West Virginia, Puerto Rico, Virgin Islands

IV. Alabama, Florida, Georgia, Mississippi, South Carolina, Tennessee

V. Illinois, Indiana, Michigan, Ohio, Wisconsin

VI. Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, South Dakota

VII. Arkansas, Louisiana, New Mexico, Oklahoma, Texas

VIII. Colorado, Idaho, Montana, Utah, Wyoming

IX. Alaska, Arizona, California, Hawaii, Nevada, Oregon, Washington, Guam, American Samoa

Introduction

The Division of Nursing of the U.S. Public Health Service conducted this survey of nursing services available for care of the sick at home in cooperation with the State and Territorial Directors of Nursing. The survey data was collected as of January 1966, and at the same time the biennial count of nurses in public health was undertaken in order to permit correlations of pertinent findings from the two studies and thus to strengthen analyses regarding public health agencies, their personnel and the populations served. The survey questionnaire and instructions for collecting the data are presented in the appendix.

This survey collected information for the first time on all agencies in the United States, Puerto Rico, the Virgin Islands and Guam that offer an organized program of nursing care of the sick at home, whether continuing and unlimited or limited to specified groups in the community. The survey also identifies all places where services are available and the population served.

It provides information on agency costs and fees for service on number and type of contracts for care, on size of nursing staff, and on the various services provided by paranursing personnel. The survey excludes agencies reporting that their services are limited to providing only demonstrations and instructions regarding patient care.

Tabulations and analysis of the survey data were carried out by the Division of Nursing. When verification of the data was necessary it was cleared either directly with the Director of Nursing of the appropriate State Health Department or through the Public Health Service Regional Nursing Consultant.

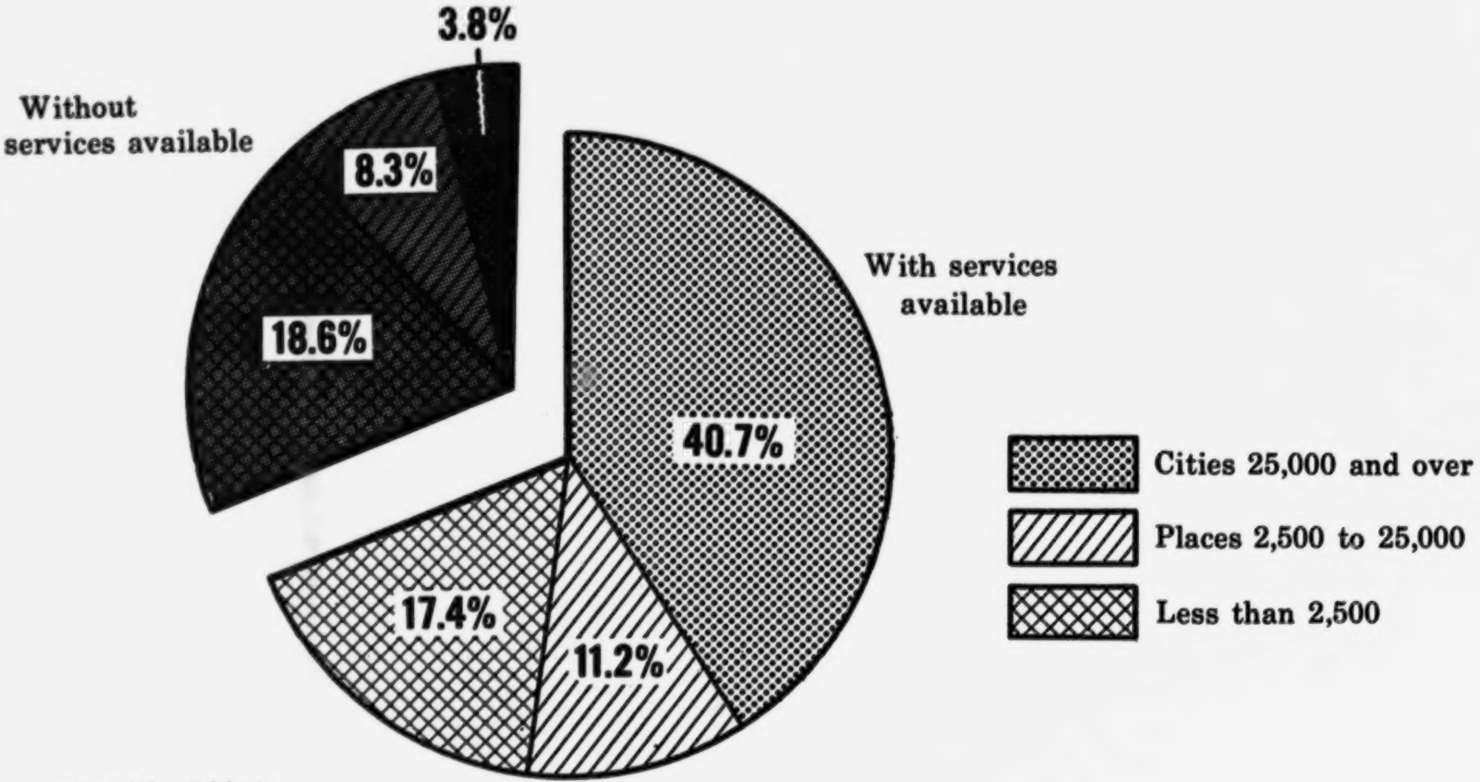
Availability of Services

Analysis of the distribution of services for nursing care of the sick at home in the population is based on the 1960 U.S. Census of Population. At that time, 179.3 million people were reported living in the United States and 2.5 million in Puerto Rico and the Territories (*7*). The census for the United States further showed that 79.8 million people live in cities with a population of 25,000 and over, 34.9 million live in places with a population of 2,500 to 25,000, and the remaining 64.6 million live in rural areas.

As of January 1, 1966, there were 124.3 million people or almost 70 percent of the population in the United States and 2.4 million (99.6 percent) in Puerto Rico, Guam, and the Virgin Islands living in areas with some type of organized service providing nursing care of the sick at home. The type of services available, however, varies with localities. In some areas, continuing comprehensive care is offered to anyone who is sick at home; in others, care is restricted to persons residing in specified geographic areas; while in still others, care is limited to persons in selected age groups, in diagnostic categories, or with other specified characteristics.

Figure 1 shows the distribution of U.S. populations with and without nursing services for home care of the sick by size of locality. The largest proportion of the population, 40.7 percent, live in cities of 25,000 and over and have nursing services available for home care of the sick. The next highest proportion, 18.6 percent of the population representing 33.4 million people, live in rural areas and do not have these necessary nursing services. Over 60 percent of the total population without service live in rural areas.

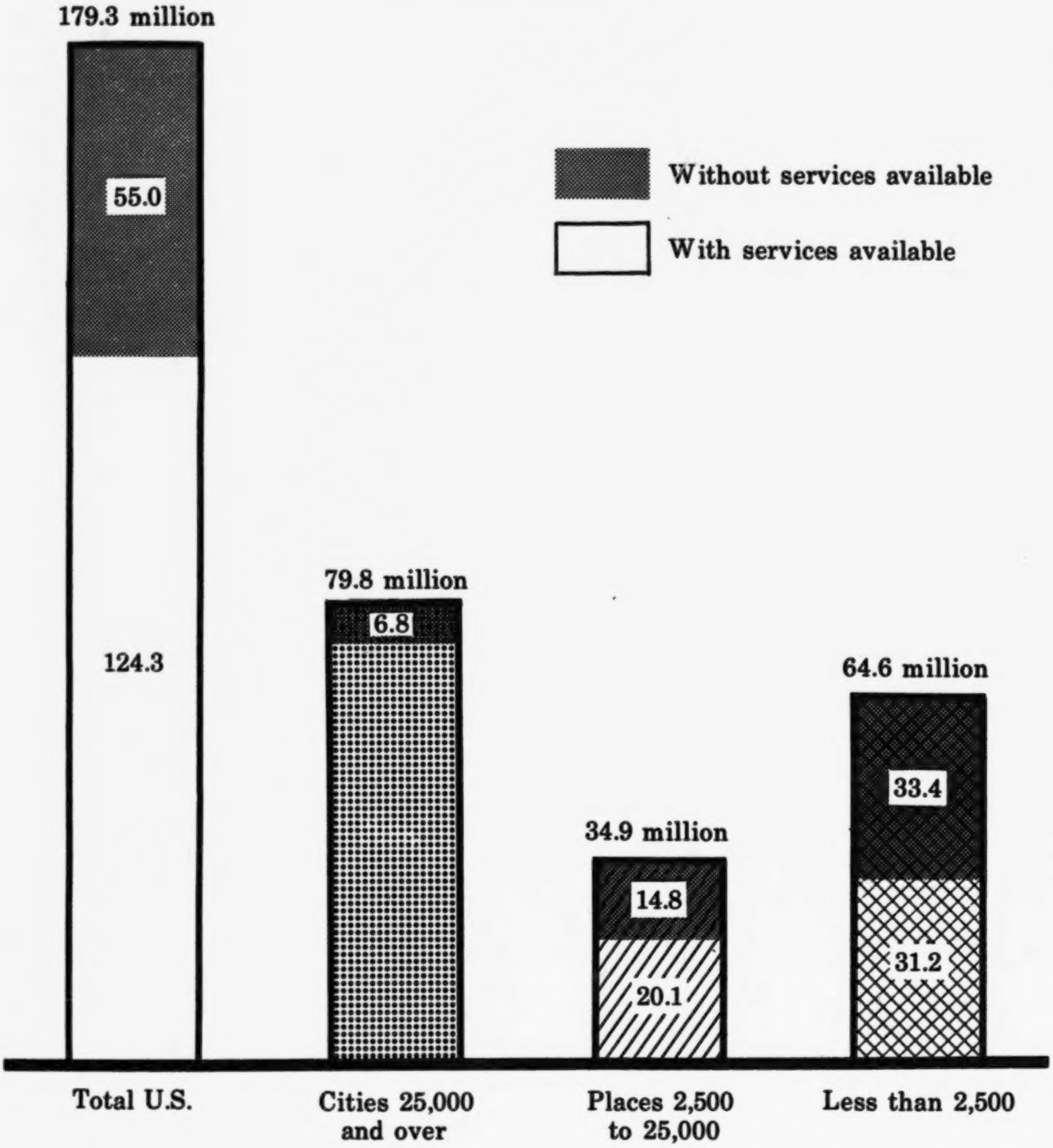
***Figure 1.* Percentage distribution of U.S. population, by availability of nursing services for care of the sick at home in cities, places, and rural areas, January 1, 1966**



SOURCE : Table 14.

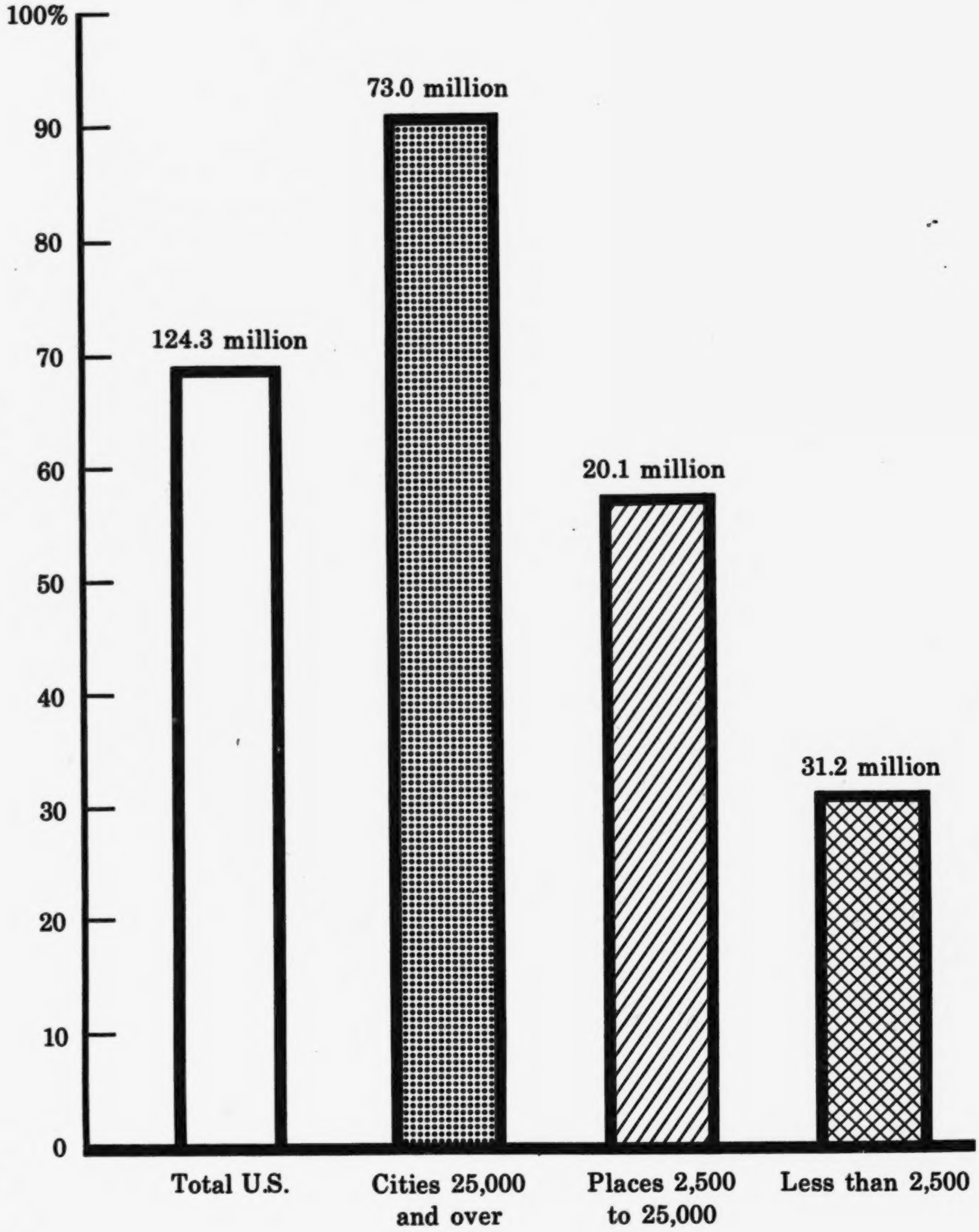
The discrepancy in the availability of home care nursing services is further documented by comparing the coverage in various concentrations of the population. (See figures 2 and 3.) Although 91 percent of those people living in cities of 25,000 and over have services provided, only 57 percent of those living in places with 2,500 to 25,000 population and 48 percent of the rural population (in places less than 2,500) have such services available. Detailed information is given in table 14.

Figure 2. **Distribution of U.S. population in cities, places, and rural areas, with and without nursing services available, January 1, 1966**



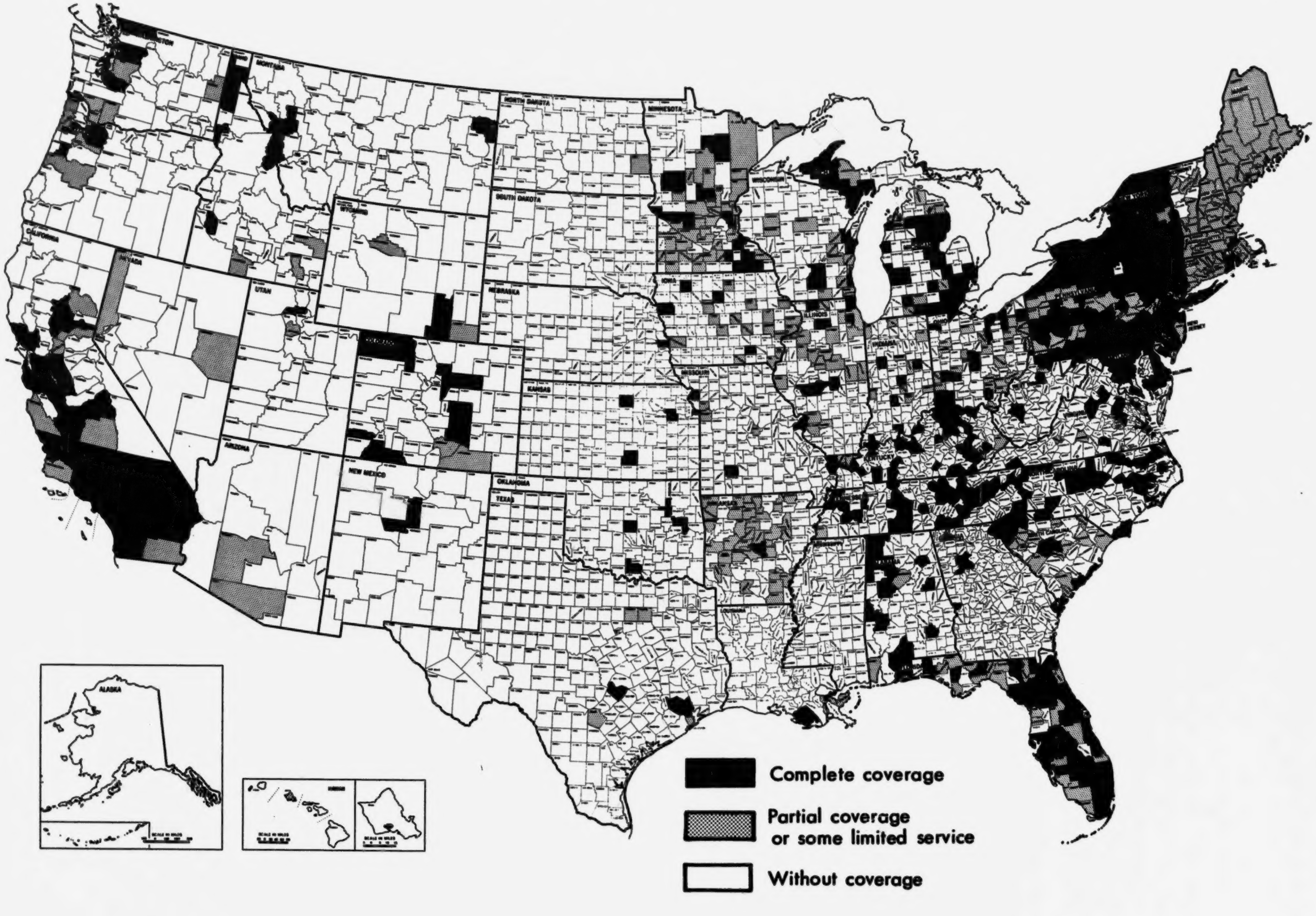
SOURCE : Table 14.

Figure 3. **Percentage distribution of population in cities, places, and rural areas with nursing services available for care of the sick at home, January 1, 1966**



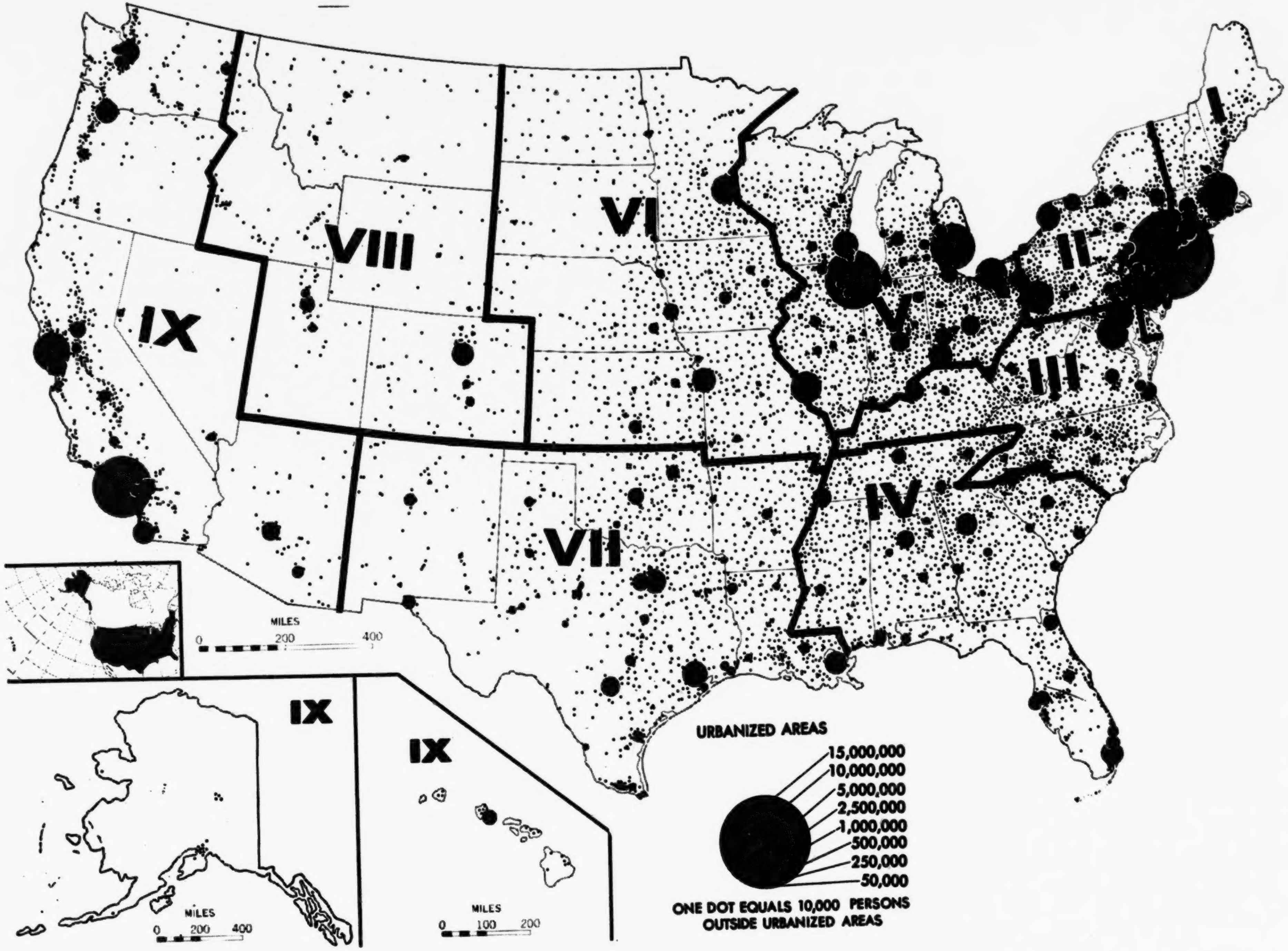
SOURCE : Table 14.

Figure 4. **Geographic distribution of U.S. population, by availability of nursing services for care of the sick at home, January 1, 1966**



WASHINGTON
MONTANA
NORTH DAKOTA
MINNESOTA
SOUTH DAKOTA
WISCONSIN
WYOMING
CALIFORNIA
NEVADA
NEBRASKA
IOWA
ILLINOIS
UTAH
COLORADO
KANSAS
MISSOURI
KENTUCKY
ARIZONA
NEW MEXICO
OKLAHOMA
TEXAS
ARKANSAS
LOUISIANA
MISSISSIPPI
NEW YORK
NEW JERSEY
ALASKA
HAWAII
Complete coverage
Partial coverage or some limited service
Without coverage

Figure 5. Population distribution: 1960


I
II
III
IV
V
VI
VII
VIII
IX
IX
IX
MILES
0
200
400
MILES
0
200
400
MILES
0
100
200
URBANIZED AREAS
15,000,000
10,000,000
5,000,000
2,500,000
1,000,000
500,000
250,000
50,000
ONE DOT EQUALS 10,000 PERSONS OUTSIDE URBANIZED AREAS

Comparison of this data with that reported in the 1963 survey shows an increase of almost 15 percent of the population who are provided with some type of nursing care of the sick at home (*9*). This increase includes 10 percent of the population living in areas with less than 2,500 population and 5 percent of the people living in areas with larger populations.

AVAILABILITY IN STATES

Three States and the District of Columbia report that services for nursing care of the sick at home are offered to all their residents, eight other States report care available to over 90 percent of their population. At the same time three States report no provision made for these services and six others report care is available to less than 30 percent of their residents. In addition to geographic differences, shown in figure 6, considerable variation is reported in the extent to which services are limited to groups within the State populations. Twenty-seven States report that some of the programs are restricted to persons of specified age or diagnostic classifications. In 14 of these States, such limitations apply to less than 10 percent of the population with care programs, but in three States they pertain to more than two-thirds of the population with established programs. This provides further evidence of the need to expand services in order to make nursing care available to all persons who are sick at home.

Cities and Towns

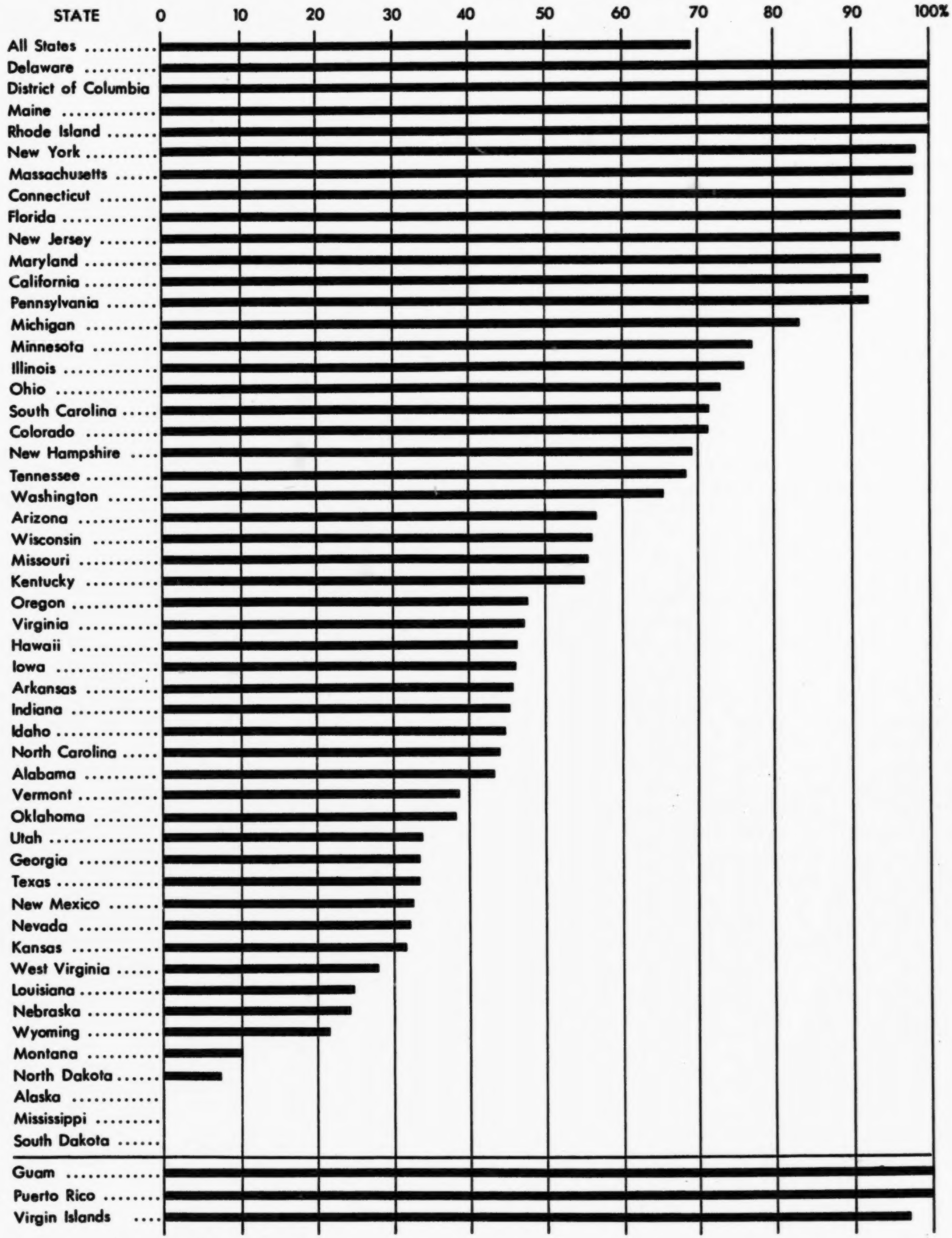
According to the 1960 census there are 19,790 places in the United States (*7*). This number includes incorporated cities, towns, villages or boroughs, unincorporated places, and other populated areas. The distributions of nursing programs for care of the sick at home among these places again highlight the association between area of residence and availability of home care. As shown in table 1, there are 7,308 places (36.9 percent) where these nursing services are provided. When analyzed by size of populations, however, a gradient is apparent with over 82 percent of the more populous cities, over 52 percent of the smaller cities and towns, and less than 30 percent of the places with less than 2,500 population having services available for the sick at home.

Table 1.—Distribution of places with nursing services for care of the sick at home, by population groups

Population range	Places		
	Total [1]	With nursing services	
		Number	Percent
Total U.S.	19,790	7,308	36.9
25,000 and over	765	630	82.4
2,500 to 25,000	4,680	2,452	52.4
Less than 2,500	14,345	4,226	29.5

[1] U.S. Department of Commerce. Bureau of Census. U.S. Census of Population: 1960. Number of Inhabitants, United States Summary, pp. 1–13. Washington, U.S. Government Printing Office.

Figure 6. **States ranked by percentage of population with nursing services for care of the sick at home**



SOURCE: Table 24

Counties

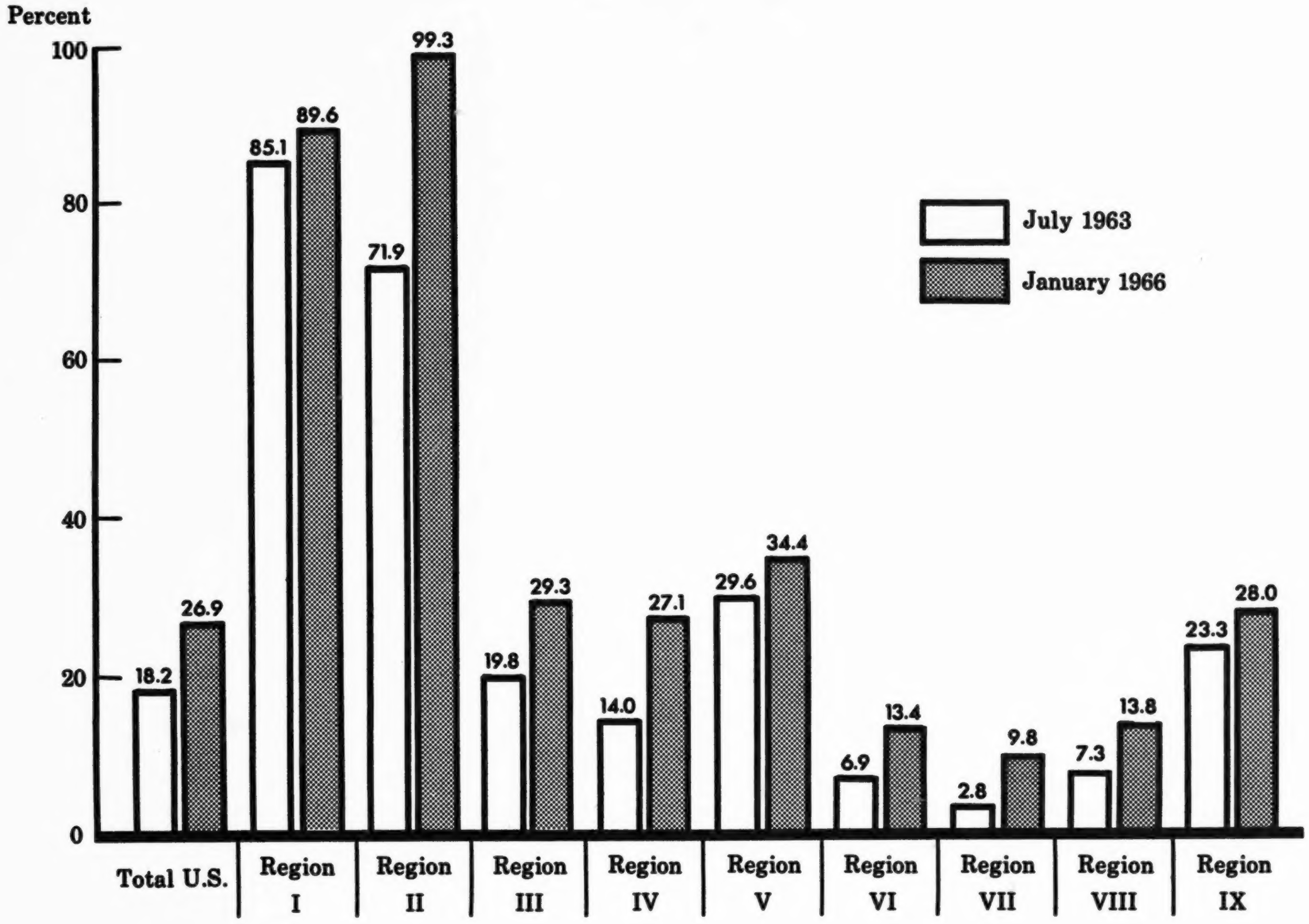
Counties or comparable jurisdictional units are considered the primary divisions of the States. There are 3,134 of these primary divisions in the United States (*7*), 2,290 of which have made no provision for home nursing care of the sick. The remaining 844 counties have services available, and the State reports indicate 694 (82 percent) of them make care available to all residents. Although, as shown in figure 7, services have been extended in all regions of the country during the past 2½ years, the greatest progress has been made in the Middle Atlantic and South Atlantic States (Regions II, III, and IV).

Cities of 25,000 and Over

The 1960 census listed 676 cities in the United States having a population of 25,000 and over (*8*). Of these, 542 or 80 percent now have programs offering home nursing care of the sick. Since 1961, there has been an increase of 72 cities with services, 33 of which initiated services during the past 2½ years. (See table 2.)

It is interesting to note that in cities, as well as in other population groups previously mentioned, the likelihood of having nursing services available for the sick at home and for all residents increases with the size of the population. Table 3 shows

***Figure 7.* Percentage of counties with nursing services available for care of the sick at home, by Public Health Service Region, July 1963 and January 1966**



SOURCE : Table 15.

three-fourths of the cities with populations of 25,000 to 50,000 have home care services provided, and these proportions increase as the size of the population increases. Of the 134 cities without services, all have less than 300,000 people, and all but 12 have less than 100,000.

Examination of the trend in services reported for cities of 25,000 and over during the past shows that growth has occurred in all groups. The largest proportional increase, shown in figure 8, occurred in cities of 25,000 to 50,000 population. It represents the initiation of services in 48 cities, a 13 percent growth since August 1961 (*13*). In contrast, cities of 50,000 to 100,000 population and those 100,000 and over show services established in 18 and 6 cities respectively, or an increase of 10 and 4 percent for these groups over the same period of time.

Table 2.—Population distribution of cities of 25,000 and over with nursing services available for care of the sick at home, 1961, 1963, 1966

Cities of 25,000 and over[1]	1961		1963		1966	
	Number	Percent	Number	Percent	Number	Percent
All cities	676	100.0	676	100.0	676	100.0
Cities with service	470	69.5	509	75.3	542	80.2
Cities without service	206	30.5	167	24.7	134	19.8

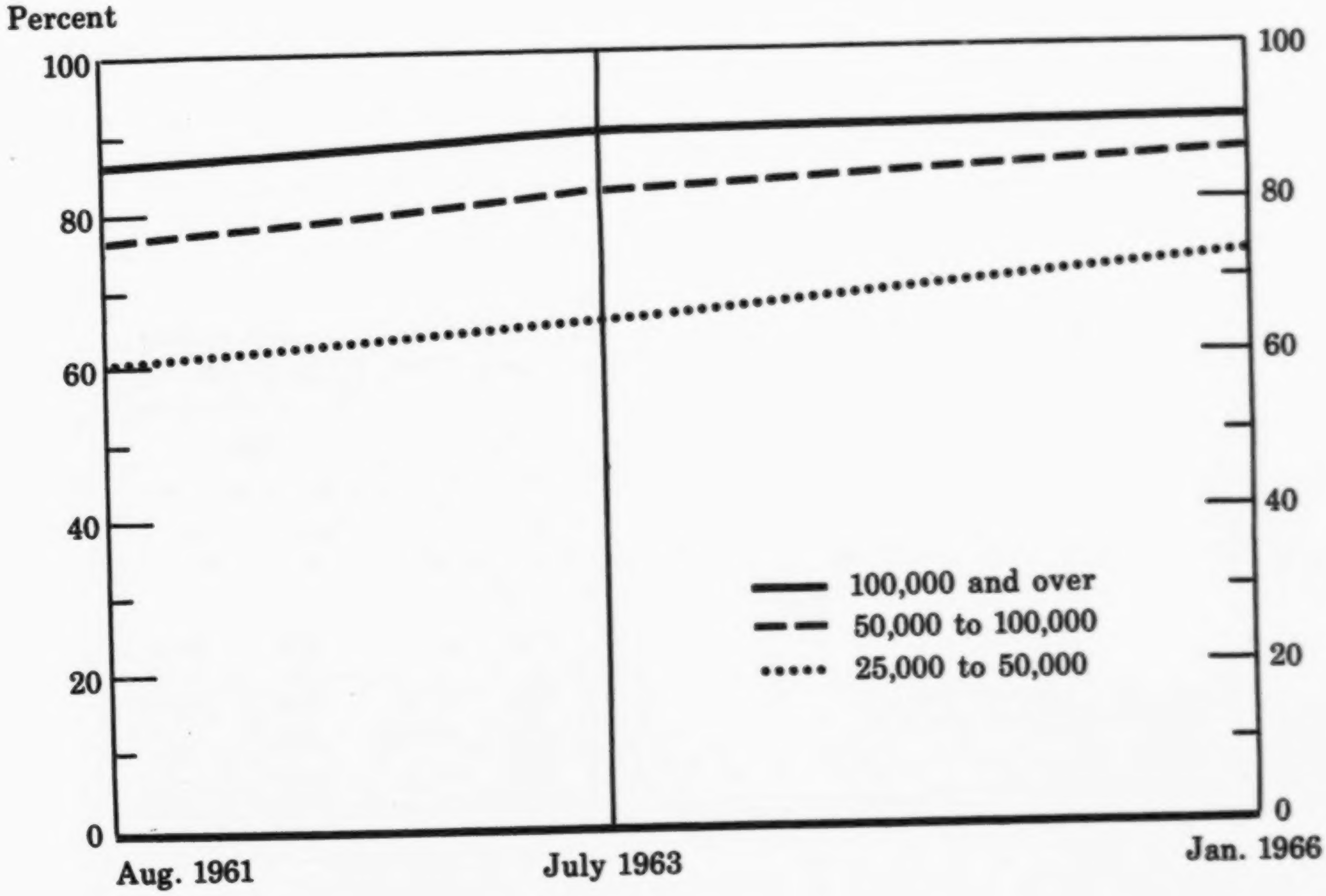
[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. Availability of Services for Nursing Care of the Sick at Home. July 1963. PHS Publication No. 1265, p. 7. Washington, U.S. Government Printing Office.

Table 3.—Cities of 25,000 population and over having services for nursing care of the sick at home, by population range, January 1, 1966

Population range	Total cities[1]		With services available		
	Number	Population (in millions)	Percent of cities	Percent of population	
				Unlimited services	Limited services
Total	676	76.0	80.2	90.1	1.0
500,000 or more	21	28.6	100.0	100.0	0
250,000 to 500,000	30	10.8	96.7	97.4	0
100,000 to 250,000	79	11.4	86.1	86.9	0
50,000 to 100,000	180	12.5	86.1	85.4	1.4
25,000 to 50,000	366	12.7	73.5	69.2	4.7

[1] U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. Number of Inhabitants, Supplementary Reports, Population of Cities of 25,000 or More: 1960, p. 1. Washington, U.S. Government Printing Office.

Figure 8. **Growth in availability of nursing services for care of the sick at home in cities with population of 25,000 and over, 1961–1966**



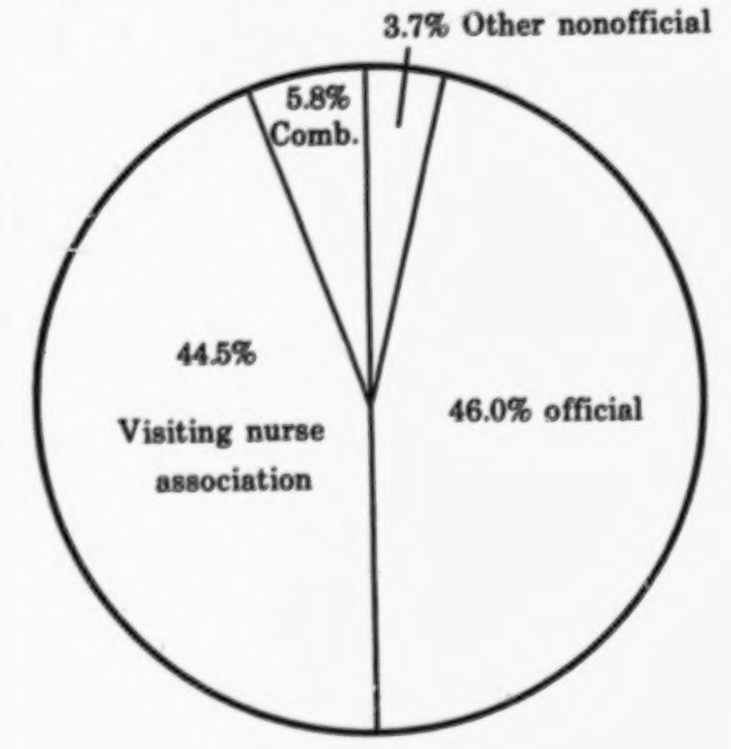
SOURCE : Table 16.

Agencies and Personnel Providing Services

On January 1, 1966, there were 1,460 agencies in the United States, Puerto Rico, and the Territories providing some type of nursing services for care of the sick at home. This includes the 1,262 agencies offering unlimited services to all the population served and the 198 agencies reporting care available but limited to certain categories of patients. As shown in figure 9, local official agencies and visiting nurse associations are almost equally represented and together account for 90.5 percent of all the home care services reported. These two organizations, administratively joined as combination agencies, provide an additional 5.8 percent of all services given. Hospital-based home care programs and those available from tuberculosis associations, cancer societies, or similar organizations are grouped under other nonofficial agencies. They represent only 3.7 percent of the agencies providing services.

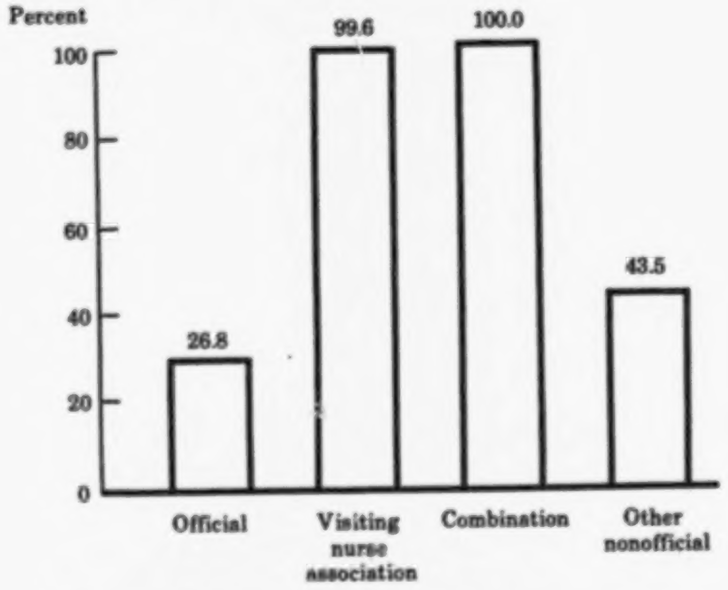
Although these distributions are interesting, knowledge of the extent to which all public health nursing programs are participating in care of the sick is essential for a meaningful analysis of trends and of the utilization of community nursing resources. Information obtained from the 1966 Census of Nurses Employed in Public Health showed there were 3,363 local public health agencies in the United States, excluding boards of education (*12*). As would be expected, almost 100 percent of all visiting nurse associations and combination agencies provide direct home care services. (See figure 10.)

***Figure 9.* Distribution of programs for nursing care of the sick at home, by type of agency, January 1, 1966**



SOURCE: Table 17.

***Figure 10.* Percentage of agency participation in nursing care of the sick at home**



SOURCE: Table 18.

Only 27 percent of all local health departments, however, offer these types of nursing services and of these 180, over one-fourth of those with service, limit care to patients in categorical groups.

Since agencies that provided limited services were not included in previous surveys, comparisons can be made only of data relating to agencies offering complete services; i.e., care available to all the population covered. Table 4 shows that during the 2½ year period following the 1963 survey (*9*), changes occurred in both the number and the proportional distribution of agencies offering services on an unlimited, continuing basis. Of the local health departments, 108 had extended their nursing programs to include this service, demonstrating a 28-percent increase since July 1963 and bringing the official agency representation up to almost 40 percent of all agencies offering this type of coverage. Compared with estimates showing that approximately 15 percent of all local official agencies provided the service in 1963 (*9*), (*11*), this data also indicates a 5-percent increased participation of local health departments in nursing care of the sick.

In contrast to the trend in health departments, 43 (6.2 percent) less visiting nurse associations were reported in 1966 than in 1963. The impact of this change on the availability of care is unknown but, since the reports show the reduction is due primarily to agency mergers, it would appear to be slight and may even indicate improvement in the utilization of resources. Mergers were reported for the New England States, Pennsylvania, and Florida. They involved most frequently the small one-nurse and two-nurse agencies, and undoubtedly reflect the growing need to expand service, conserve costs, and make better use of staff and administrative personnel.

The extent to which two or more agencies serve populations in one geographic area was also of interest. This was most apparent in cities of 25,000 population and over: in these 542 cities with home care nursing services, 102 had more than one agency providing this care, five cities reported three such agencies and one, New York City, reported eight different agencies offering nursing care to the sick at home.

Table 4.—Distribution of programs providing complete coverage of population sick at home, by type of agency, July 1963 and January 1, 1966

Type of agency	Programs with complete coverage			
	July 1963[1]		January 1966	
	Number	Percent	Number	Percent
All agencies	1,163	100.0	1,262	100.0
Official	384	33.0	492	39.1
Visiting nurse association	692	59.5	649	51.4
Combination	85	7.3	85	6.7
Other nonofficial	2	0.2	36	2.8

[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Availability of Services for Nursing Care of the Sick at Home. PHS Publication No. 1265, p. 19. Washington, U.S. Government Printing Office, 1964.

NURSING PERSONNEL

According to the 1966 Census of Public Health Nurses (*12*), there are 23,738 professional nurses and 841 licensed practical nurses employed by local public health agencies exclusive of boards of education, in the United States, Puerto Rico, and the Territories. This survey showed that 13,261 professional nurses, 56 percent of all those in public health,[1] are employed by agencies with services available for care of the sick at home. (See figure 11.) This proportion varies greatly, however, among the States. Of the 48 States with services available, six have less than 20 percent of the nurses in public health employed by agencies providing care of the sick, whereas eight States and the District of Columbia have over 80 percent of the nurses employed by agencies with home care services. (Refer to table 19.) In addition, 557 licensed practical nurses are employed by these agencies, primarily by visiting nurse associations.

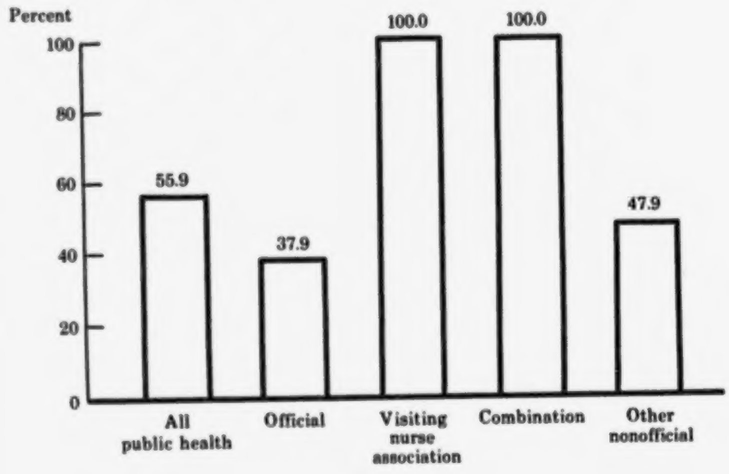
Agencies were asked to indicate the number of nursing staff involved in supervising and providing direct patient care and the number responsible for the administration of services only. Based on these reports it was estimated that 81.3 percent of all nursing personnel employed by agencies with nursing care of the sick programs provide direct service to patients.

Size of Nursing Staff

From the current survey we were able to determine for the first time the size of the nursing staff in agencies providing home nursing care of the sick. As illustrated in figure 12, a staff of from two to four nurses occurs most frequently; 57 percent have less than five, almost 80 percent less than 10, and 92 percent less than 25 nurses. In all of these categories, official agencies are fairly equally represented.

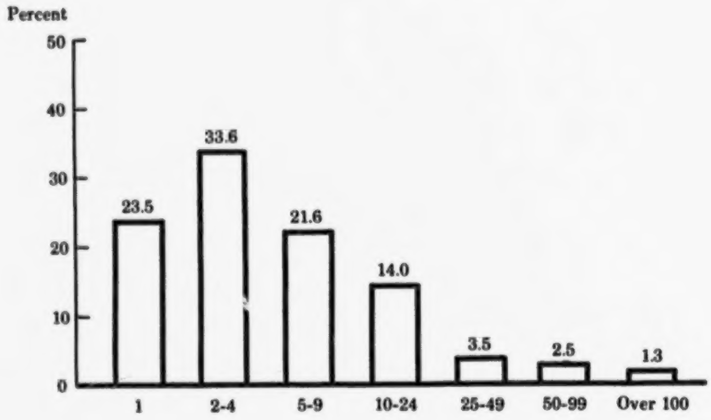
The proportion of local public health agencies with services, however, showed a definite relationship between the size of agency staff and care of the sick at home programs. In every instance the proportion of agencies offering services increased as the size of staff increased. (See figure 13.) Almost two-thirds of the agencies with 25 or more full-time staff offer nursing care of the sick at home, whereas only one-third of the one-nurse agencies provide this care.

***Figure 11.* Percentage of nurses employed by local public health agencies providing nursing care of the sick at home**



SOURCE: Table 18.

***Figure 12.* Distribution of services for nursing care of the sick at home, by size of nursing staff**

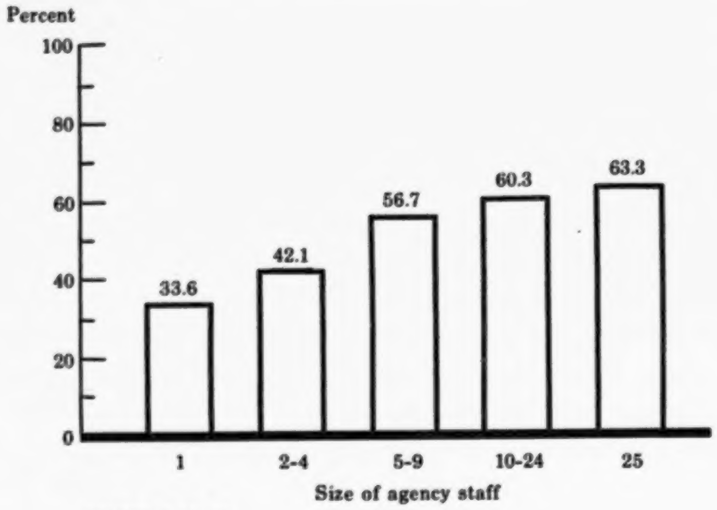


SOURCE: Table 20.

---

[1] When the 5,209 boards of education in the United States, employing 15,282 full-time professional nurses, were included in this analysis, it showed that only 17 percent of local public health agencies provide nursing services for care of the sick at home.

Figure 13. Proportion of local public health agencies with services available for nursing care of sick at home, by size of full-time nursing staff



SOURCE: Table 21

Of the 344 agencies having a staff of one nurse, the majority are found in the New England States. Eighteen agencies have a staff of over 100; five of these agencies are located in New York State. Distributions by regional areas are presented in table 21.

Ratio of Nurses to Population Covered

As cited on page 3, there are 124.3 million people in the United States with nursing services available for care of the sick at home. And this service is provided by 13,147 professional nurses. Therefore there is, on the average, one nurse to 9,452 population for home care nursing services in the United States. This ratio falls far short of the recommended figure of one nurse to 2,500 population which is considered necessary for a public health agency to give comprehensive home nursing care to the community served (*1*) (*3*).

The variation in the ratios among States reporting these services available is of particular significance for deeper examinations—through comparative, analytical studies of factors related to program effectiveness, gaps in service, community needs for home care programs, and for comprehensive health planning. As shown in table 5, there are no States with ratios approximating the recommended proportions. Five States, including the District of Columbia, have a ratio of one nurse to 5,000 population or slightly less, which is considered the number necessary for an agency to provide high quality public health nursing services without a bedside care program (*1*), (*3*), (*14*). Twenty-one States and Puerto Rico show ratios to indicate that one nurse is expected to provide all public health nursing services, including bedside care of the sick, to an average of over 10,000 people. In one city this ratio was one nurse to 58,000 population. Disparities such as these raise questions regarding the comprehensiveness of care which can be provided, the proportion of persons in need of care who actually receive care, and the total impact of the services on community health as compared to their potential effort.

Table 5.—Ratio of nurse to population coverage in States with agencies providing nursing care of the sick at home

Nurse: population ratio	Number of States [1]
1:20,000 or more	4
1:15,000 but less than 20,000	2
1:10,000 but less than 15,000	15
1:5,000 but less than 10,000	22
1:4,000 but less than 5,000	5

[1] Three States reported no agencies providing services.

SOURCE: Table 22.

YEAR SERVICES WERE ESTABLISHED

Of the 1,460 agencies that reported services for nursing care of the sick at home, only 104 did not provide information as to the year the program was initiated. Since visiting nurse associations are established, traditionally, to give this care, it was not surprising to find that these associations represented two-thirds of all programs reported in existence prior to 1945. Their dominance continued to be apparent during the next 10 years when more than half of the nursing home care services initiated were in visiting nurse associations. Since 1955, however, the pattern has been changing with official agencies taking a more active role. In fact, over four-fifths of all programs established since 1960 have been in health departments. A dramatic increase in services occurred in 1962 when 161 programs were initiated, 137 of which were in official agencies. (See table 6.)

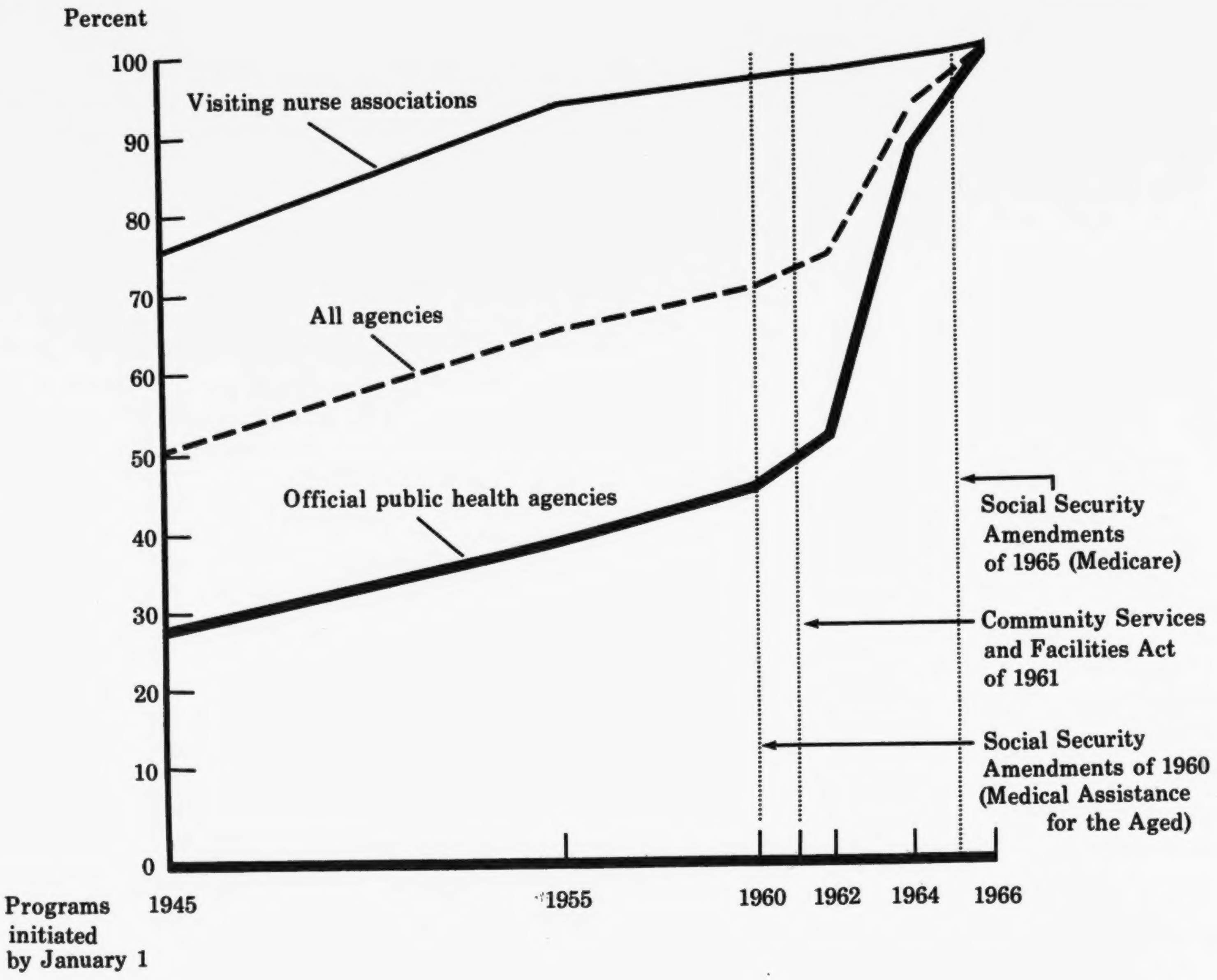
Table 6.—Number and type of agencies reporting year nursing care of the sick at home was initiated

Type of agency	Total agencies [1]	Year service initiated								
		Prior to 1945	1945–1954	1955–1959	1960	1961	1962	1963	1964	1965–1966
Total	1, 356	685	189	74	25	35	161	85	51	51
Official	612	167	61	43	15	32	137	72	42	43
Visiting nurse association	611	464	104	21	3	2	5	3	2	7
Combination	82	27	14	9	5	1	13	7	6	------
Other nonofficial	51	27	10	1	2	----	6	3	1	1

[1] Information not reported by 104 agencies.

Figure 14 illustrates this pattern. It shows a leveling off of programs being initiated by visiting nurse associations during the 1960's, and a marked expansion in these services by official public health agencies. This expansion was undoubtedly influenced by the Amended Social Security Act of 1960 which provided medical assistance for the aged and by the Community Services and Facilities Act of 1961 which provided Federal monies for community health. The full potential of the Health Insurance for the Aged provided by the Social Security Amendments of 1965 is not yet evident but the continued increase in programs for care of the sick at home gives some indication that we are moving toward the goal of establishing nursing care programs to serve all people.

Figure 14. Accumulative distribution of established home nursing care of the sick programs, by year program was initiated and by type of agency



Paranursing and Supportive Services

In the 1963 survey and again in 1966, agencies that provide nursing care to the sick at home were queried as to whether paranursing services also were available to these patients. In recent years the trend has been toward encouraging the availability of these services. This impetus was accelerated in 1965 by the authorization of Health Insurance for the Aged, which required agencies to furnish nursing care and at least one other therapeutic service in order to qualify for certification as a home health agency.

Responses to the survey questionnaire showed that 368 agencies, or 25 percent of those offering nursing care of the sick at home, provide other professional services as well. Two hundred (54 percent) of these agencies were health departments and 122 (33 percent) were visiting nurse associations. The distribution of these services among the specific types of agencies reporting, however, documents the need for further implementation. Only 30 percent of the official agencies and 19 percent of the visiting nurse associations provide therapeutic services other than nursing.

Number and Types of Professional Services Provided

As in the 1963 survey (*9*), physical therapy, nutrition and social services were the three most common services reported. Of the 368 agencies, 80 percent provide physical therapy, 35 percent nutrition service, 20 percent social service, 15 percent speech therapy, and 13 percent occupational therapy. All other services, including mental health counseling and rehabilitation, were reported by less than 5 percent of the agencies.

Variation also was found in the number of paranursing services furnished. As shown in table 7, the largest majority of agencies, 228, reported only one therapeutic service other than nursing care. The largest number of professional services, six, were provided by only two agencies, one visiting nurse association and one combination agency.

Table 7.—Number of paranursing services provided, distributed by type of agency

Number of services	All agencies		Type of agency			
	Number	Percent	Official	Visiting nurse association	Combination	Other non-official
Total	368	100.0	200	122	31	15
1	228	62.0	126	85	13	4
2	56	15.2	27	18	8	3
3	58	15.8	38	11	6	3
4	18	4.9	6	6	3	3
5	6	1.6	3	1	—	2
6	2	.5	—	1	1	—

As would be expected, as the size of the agency nursing staff increases, the number and variety of other services also tend to increase. For example, only 6 percent of the one-nurse agencies included in the survey provided any paranursing services, only two of these agencies (0.6 percent) provided more than three such services. In contrast to this, 83 percent of the large agencies with a staff of 100 or more nurses have at least one other service; 39 percent have three or more paranursing services (See table 8.)

Personnel

For the first time, data was collected to determine the number of professional personnel employed to give paranursing services and the year the services were initiated. The information was more difficult to analyze since some agencies include full-time personnel on their staff but others may have part-time employees shared with other agencies or employed by contract.

The agencies offering these therapeutic services employ as staff, or by contract, 500 full-time and approximately 300 part-time paranursing personnel. The exact number of part-time staff could not be determined because of duplications in personnel reported by agencies sharing their services. It was interesting to find that half of all the full-time personnel are employed to provide physical therapy.

Almost half of all these paranursing services were initiated in the past 3 years; only 79 agencies reported having any of these services available prior to 1950.

Home Health Aide Service

In recent years the increasing numbers of aged, chronically ill, and convalescent patients in the population who are in need of nursing care at home have intensified the growing nurse shortage. Recent legislation which provides for medical care of the aged and indigent has accelerated the demands for nursing care and put added stress on the services available. As a result, public health agencies are employing auxiliary workers to supplement and extend their present nursing services. These nonprofessional personnel, with instruction and nursing supervision, provide the less technical, personal services required by patients, thereby improving the utilization of nurse staff as well as the total care provided to patients and their families.

Table 8.—Percentage of agencies with paranursing services other than nursing, by size of nursing staff

Nursing staff size	Agencies	Other paranursing services provided			
		At least 1		3 or more	
		Number	Percent	Number	Percent
Total	1,460	368	25.2	84	5.7
1	344	22	6.4	2	0.6
2 to 4	491	68	13.8	12	2.4
5 to 9	315	104	33.0	20	6.3
10 to 24	204	102	50.0	18	8.9
25 to 49	52	33	63.5	12	23.1
50 to 99	36	24	66.7	13	36.1
100 and over	18	15	83.3	7	38.9

As shown in table 9, of 66 agencies providing nursing care to the sick at home, 632 employ home health aides. Although only 32 of the 649 visiting nurse associations have this service, they employ 438 or 70 percent of the total number of personnel reported. The consistently low proportion of agencies with this service was noted. These data show that less than 5 percent of both the official agencies and the visiting nurse associations employ home health aides; 11 percent of the combination and 9 percent of the nonofficial agencies have the service.

In light of recent trends toward the broadening of public health services for care of the sick at home, it was of interest to see when home health aide service was established. Only 56 agencies reported this information, but 48 of them stated the service was initiated in 1960 or later and 34 or 61 percent started the service after 1962.

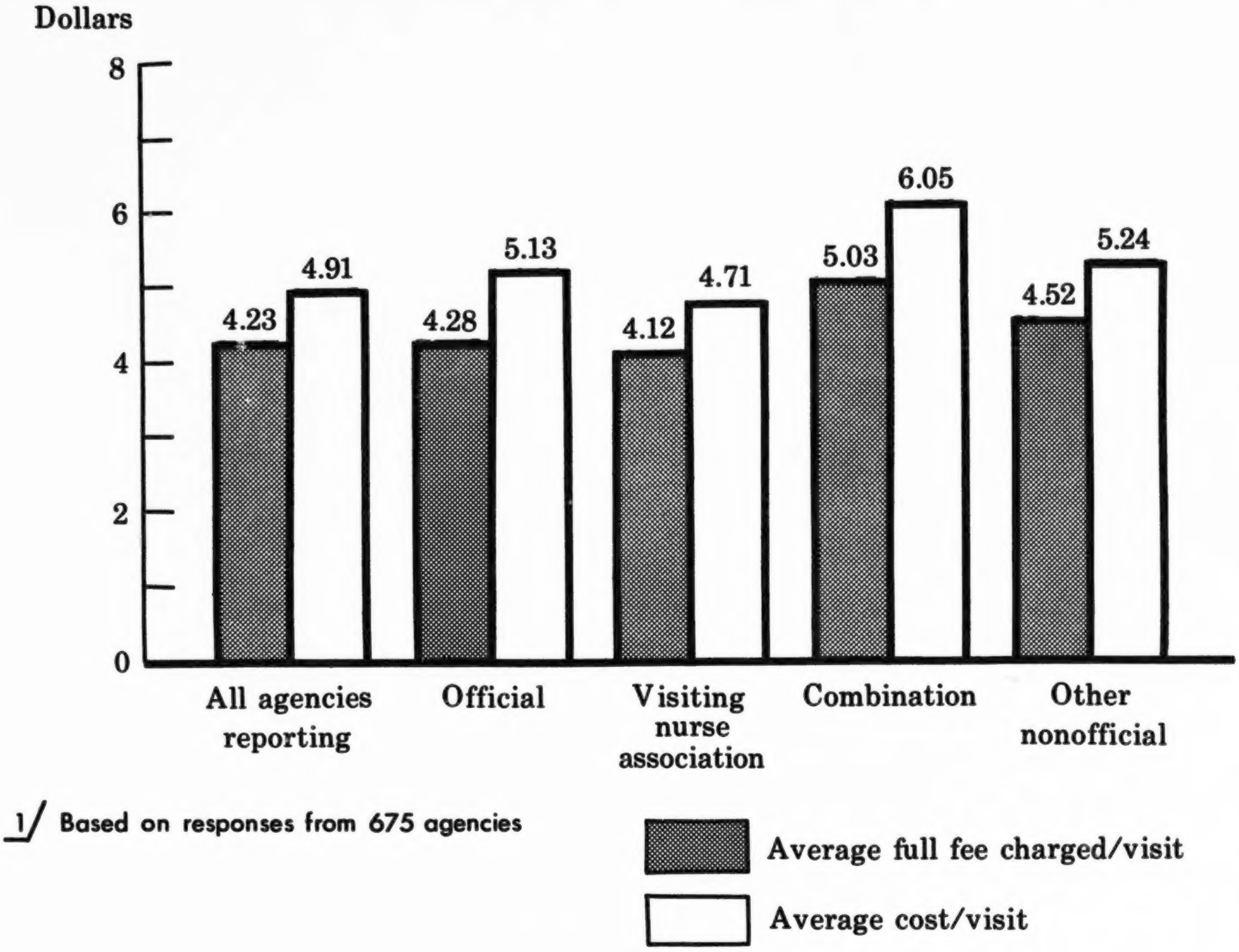
Homemaker Service

Thirty-nine agencies also reported providing homemaker service. Although the addition of a homemaker does not substitute for nursing personnel, such assistance often enables the patient to remain at home and makes it possible for the nursing care plan to be put into effect. Homemaker service, however, usually is provided by social service or welfare agencies. Therefore it was not surprising to find that, of the 39 agencies offering this service, almost two-thirds (61 percent) of the 265 personnel reported were employed by 22 visiting nurse associations. All other agencies have relatively few personnel in this category.

Table 9.—Distribution of home health aide and homemaker services, by type of agency and personnel employed

Type of agency	Home health service		Homemaker service	
	Agencies	Personnel	Agencies	Personnel
Total	66	632	39	265
Official	20	107	11	32
Visiting nurse association	32	438	22	161
Combination	9	71	4	63
Other nonofficial	5	16	2	9

Figure 15. **Comparison of average cost and full fee charged per nursing home visit, by type of agency**



1/ Based on responses from 675 agencies

Cost and Payment For Services

The payment for services for nursing care of the sick at home has historically been the accepted practice of voluntary agencies such as visiting nurse associations (*9*). Fees for services may be collected either directly from patients or indirectly by third-party agreements from other sources such as welfare departments, insurance companies, and other organizations supporting patient care and rehabilitation. Services by official health agencies, however, have traditionally been given without reimbursement by recipients.

Three Federal actions have occurred in the past 10 years which have effected a change in the policies of many agencies, particularly health departments, regarding the collection of fees for nursing care. The Social Security Amendments of 1960 (Public Law 86–778), the Community Health Services and Facilities Act of 1961 (Public Law 87–395) and the Social Security Amendments of 1965, or "Medicare," (Public Law 89–97), all provide payment for services for care of the sick at home to agencies with a policy of collecting fees regardless of whether the agency providing service was tax supported. As a result of these Federal legislative actions many official health agencies have revised their policies to allow for the collection of fees for nursing services.

Authority to Collect Fees

In the 1963 survey (*9*), 261 of the 384 official health agencies stated they had State or local authority to collect fees for services. In the 1966 study, 435 official agencies indicated such authority, and the remaining 237 agencies either had no authority for fee collection or did not respond to the question.

Of the total 1,460 agencies providing nursing care of the sick at home, 1,017 agencies (70 percent) collect fees; 399 agencies (27 percent) do not collect fees and the remaining 44 agencies did not respond. The findings showed further that the 1,017 agencies collecting fees represent over 95 percent of the visiting nurse associations and combination agencies, 70 percent of the other nonofficial agencies but only 41 percent of the local official agencies.

The extent to which policy restrictions regarding fee collection limit patient care is unknown; the influence can be assumed to be adverse, however, since payment for care offers an important source of revenue which might be used to employ additional staff for extending services or for strengthening the quality of services provided.

Agency Costs and Fees for Services

Information was obtained for the first time regarding the cost of providing nursing care to the sick at home and the full fee charged for services. From the 675 agencies which responded to both aspects of this question, it was learned that, regardless of size, type, or geographic location of the agency, the actual cost per visit was higher than the fees charged for services. (See figure 15.) This finding is consistent with the National League for Nursing report of the 1965 survey of costs and charges of nonofficial and combination public health nursing agencies (*5*). The difference reported in this study between the actual costs and charges made varied from as little as 50 cents to as much as $6 per nursing visit, with the agency bearing the loss in every instance.

277-908 O - 68 - 5

Agency Cost per Nursing Visit

The actual cost of providing care was reported by 805 agencies.[2] Computations of the data showed that the average cost of nursing services for care of the sick at home is $5.23 a visit. The range, however, is from $4.19 to $7.05 per nursing visit. On the average, shown in table 10, costs reported by agencies in the New England States (Region I) are slightly lower than those for the country as a whole, while those in States on the west coast (Region IX) are generally higher. The highest cost reported was $14.98 per visit and occurred in one agency in New York State. Another agency, in Oregon, closely approached this figure with a per visit cost of $14.

Although the cost of care varied somewhat with the area served, two other factors appeared to be associated more directly with the cost of nursing services: the type and size of agency providing the services.

Table 10.—Average costs per nursing visit, by agencies in Public Health Service Regions

PHS regions	Reporting agencies	Average cost
Total	805	$5.23
Region I	257	4.19
Region II	236	5.71
Region III	28	5.51
Region IV	51	5.88
Region V	109	5.43
Region VI	37	4.57
Region VII	11	5.33
Region VIII	16	5.58
Region IX	60	7.05

Table 11.—Average cost per nursing visit, by type and size of agency

Staff size	Average cost/visit for agencies reporting [1]				
	All agencies	Official	Visiting nurse association	Combination	Other non-official
Average costs	5.23 (805)	6.20 (238)	4.68 (496)	5.99 (59)	5.28 (12)
1	3.88 (87)	4.69 (19)	3.62 (64)	—	4.08 (4)
2 to 4	4.61 (252)	5.30 (69)	4.25 (171)	5.31 (5)	6.21 (7)
5 to 9	5.58 (234)	6.67 (66)	5.10 (156)	6.05 (11)	3.54 (1)
10 to 24	5.91 (151)	6.86 (58)	5.22 (77)	5.67 (17)	—
25 to 49	6.07 (39)	6.76 (12)	5.55 (14)	6.18 (12)	—
50 to 99	6.40 (28)	7.24 (9)	5.94 (9)	6.06 (10)	—
100 and over	6.98 (14)	7.12 (5)	6.56 (5)	7.34 (4)	—

[1] Numbers in parentheses indicate number of agencies reporting information.

---

[2] The method used to estimate cost per visit was not requested; some agencies did give this information and showed that various costing methods were used and for different years. Because of the lack of comparability of these data, inferences drawn from the analyses must be guarded.

As shown in table 11, visiting nurse associations reported the costs per nursing visit to be, on the average, slightly lower than visits reported by any other type of agency. Other nonofficial agencies ranked second lowest and combination agencies next. The highest average figure given, $6.20 for official public health agencies, though still only $1.52 higher than the average cost of visiting nurse services, indicates the need for further study into administrative costs, travel requirements, staffing patterns, and other factors which may contribute to this additional expense. It may also be that these agencies serve broader segments of the population, which increases the cost of home visits. Such factors as these need to be explored to identify those which influence both the quality and the costs of care in relation to the benefits derived by the patients and families served.

The costs of care also vary with staff size. (See table 11.) As the number of nursing staff increases, the cost of the nursing home visit rises, and this gradient appears with each level of increase in staff size regardless of the type of agency providing care. Since the large agencies have been shown to provide a wider variety of care than the small ones (p. 19), the possible relationship between broader, more comprehensive care and cost of service is again suggested. This finding again documents the need for further study to determine whether cost reflects quality of care or is more directly related to administrative practices, differences in urban-rural costs of living, or other variables independent of the quality of nursing service.

Contracts for Services

Contractual agreements with third-party agencies for the payment of nursing services provided to their beneficiaries is a valuable source of funds for public health agencies. Of the 1,460 agencies in the survey, two-thirds have contracts with other agencies for the payment of nursing care of the sick at home; table 12 shows that 63 percent of the agencies have contracts for the payment of nursing care to recipients of the services of third-party agencies. The reports also showed that 27 additional agencies have contracts for services other than nursing.

As mentioned earlier, 435 official health agencies reported having the authority to collect fees for services. It was interesting to find, however, that only 89 (32 percent) of the agencies with State authority and 103 (70 percent) of the 154 with local authorization had contracts with one or more third-party agencies for payment of services given to their clients. This indicates that an average of only 44 percent of all official agencies have such contracts,

Table 12.—Distribution of agencies with contracts for nursing services by size of staff

Staff size	All agencies	Agencies with contracts	
		Number	Percent
Total	1,460	916	62.7
1	343	183	53.4
2 to 4	491	311	63.3
5 to 9	315	209	66.3
10 to 24	204	144	70.6
25 to 49	52	33	63.5
50 to 99	36	24	66.7
100 and over	19	12	63.2

in contrast with 88 percent of visiting nurse associations and 86 percent of combination agencies reporting contractual arrangements.

The number of contracts per agency ranged from 1 to 11, with the visiting nurse associations accounting primarily for the larger numbers. The size of the agency apparently has little influence on the likelihood of an agency having a contract for service—53 percent of one nurse agencies and 63 percent of the larger agencies with 100 or more staff nurses reported having contracts. The largest proportion of agencies with contracts occurred in those of moderate size; i.e., with 10 to 24 nurses employed. (See table 12.)

Third-Party Agencies

Contracts were reported with 13 different third-party agencies, six of which represented governmental agencies. The largest number of contracts reported for any one agency were made with the local welfare departments for medical assistance for the aged. Six hundred and fourteen public health agencies in 27 States reported having such contracts. Two-thirds of these health agencies were visiting nurse associations. The Veterans Administration had contracts in more States (35) than any other third-party agency. (See table 13.) It was interesting to find that 229 health departments in 27 States functioned as the third-party agency, mostly contracting with visiting nurse associations. Thirty-three visiting nurse associations also served as third-party agents, contracting with six official health agencies and 27 other voluntary associations for the care of their patients.

Table 13.—Number of contracts with third-party agencies, by type of health agency providing nursing care of the sick at home

Third-party agencies	States represented	Health agencies reporting contracts	Official	Visiting nurse association	Combination	Other nonofficial
Total	47	943	276	571	73	23
Official agencies:						
Medical assistance for aged	27	614	133	416	54	11
Other public assistance	31	534	108	381	30	15
Veterans Administration	35	418	80	289	43	6
Crippled children's service	20	308	131	151	21	5
Health departments	27	229	26	186	10	7
Other governmental agencies	25	83	14	59	9	1
Nonofficial agencies:						
Cancer societies	26	504	54	412	30	8
Other voluntary agencies	24	122	14	96	11	1
Visiting nurse associations	14	33	6	26	—	1
Other voluntary hospitals	12	29	6	22	—	1
Insurance companies:						
Blue cross	24	350	59	259	18	14
Other insurance companies	26	83	7	67	6	3
Unions and industrial organizations	21	5	1	4	—	—

Summary

The fourth survey of agencies providing nursing care to the sick at home, conducted on January 1, 1966, by the Division of Nursing, U.S. Public Health Service, in cooperation with the Association of State and Territorial Directors of Nursing, showed that almost 70 percent of the population in the United States and essentially all the population in Puerto Rico, Guam, and the Virgin Islands live in areas with some type of organized home care nursing services available to them. These services are provided on a continuing basis and include agencies offering care only to certain specified categorical groups as well as those agencies making care available to all patients without regard to age, diagnosis, or other characteristics.

Since the first survey was undertaken in 1959, considerable progress has been made in extending nursing care to persons who are sick at home. The number of large cities (25,000 and over population) with services has almost doubled. Since 1963, new services have increased rapidly in the smaller communities and are being provided to a large extent by local official health agencies. The data shows further that by 1966 services were available to 15 percent more of the population than in 1963 with the greatest increase shown in the Middle Atlantic and South Atlantic States.

In spite of these gains the survey also documents the fact that in January 1966, 55 million people in the United States were still without provision for nursing care of the sick at home. This group, residing primarily in small towns and rural areas of the country, presents a particular challenge to their communities and to the nursing profession in planning, staffing, and financing services which will meet the needs of patients in their homes.

Visiting nurse associations and local official health agencies provide over 90 percent of the home nursing care services which are presently available. The agencies providing services tend to be small; well over half employ less than five nurses. Evidence of a trend was seen, however, toward the merging of small agencies, possibly reflecting improvement in administrative practices, extension of services, and better utilization of nursing personnel.

The data raise serious questions regarding the quality of services that are being provided or the extent to which community needs for care are being met. For years authorities have considered a staff of one nurse per 2,500 population (*1*), (*3*), necessary to provide high quality public health nursing services, including care of the sick. None of the agencies surveyed approached this ratio. The average ratio reported was one nurse per 9,452 population. Twenty-one States and Puerto Rico showed ratios of one nurse to over 10,000 people for all public health nursing services. These findings highlight the essentiality of intensive study into identifying population needs for care, staff required to meet the needs identified, and factors influencing these relationships. Without such knowledge it is impossible to adjust the recommended ratios intelligently, to predict staff requirements or to analyze staffing patterns in relation to quality and scope of services available.

It was encouraging to find that programs are expanding to include supplementary nursing services provided by home health aides and other therapeutic services by paranursing personnel. The number of physical therapists employed by the reporting agencies has almost doubled in the past 2½ years. Nutrition and social services have also increased.

More official health agencies have begun to enter into contracts with third-party agents for the payment of nursing services than ever before. At the same time fees charged for services continue to be considerably below the agency's actual cost of providing care. The findings indicate that costs vary with geographic area, size, and type of agency, and suggest that other factors not included in the study may influence costs more directly than these. In addition they reemphasize the lack of knowledge regarding relationships between costs of services and staffing patterns, nurse utilization practices, and quality of care provided.

To meet the health needs of the Nation, for the young as well as the aged, for the acutely ill as well as the chronically ill, for the financially independent as well as the medically indigent, home nursing care services must be extended and strengthened. Only 27 percent of all local official public health agencies reported programs for nursing care of the sick at home. This represents one major untapped resource already in existence in numerous communities throughout the country that have not yet developed home care nursing programs. New patterns of organizing and delivering services also need to be explored to find ways of utilizing nursing personnel efficiently and economically while simultaneously providing comprehensive, effective services to patients and families in need of care.

References

(*1*) Freeman, Ruth B. *Public Health Nursing Practice*. W. B. Saunders Co., Philadelphia, Pennsylvania, 1963.

(*2*) Gardner, Mary Sewell. *Public Health Nursing*. The MacMillan Co., New York, 1927.

(*3*) Hanlon, John J. *Principles of Public Health Administration*. C. V. Mosby Co., St. Louis, 1960.

(*4*) National League for Nursing, Department of Public Health Nursing. *Home Health Aide Service in Relation to Public Health Nursing*. New York, Code No. 21–1191, 1965.

(*5*) National League for Nursing, Department of Public Health Nursing. *Cost and Charge per Visit*. New York, The League, 1965.

(*6*) U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. *Number of Inhabitants, State Volumes. Final Report PC(1)–57A*. Washington, U.S. Government Printing Office.

(*7*) U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. *Number of Inhabitants, United States Summary. Final Report PC(1)–A*. Washington, U.S. Government Printing Office.

(*8*) U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. *Supplementary Reports, Population of Cities of 25,000 or More: 1960 PC(S1)–8*. June 21, 1961. Washington, U.S. Government Printing Office.

(*9*) U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. *Availability of Services for Nursing Care of the Sick at Home*. July, 1963. PHS Publication No. 1265. Washington, U.S. Government Printing Office.

(*10*) U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. *Nurses in Public Health, January 1, 1962*. PHS Publication No. 785 (Revised 1962). Washington, U.S. Government Printing Office.

(*11*) U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. *Nurses in Public Health, January 1, 1964*. PHS Publication No. 785 (Revised 1964). Washington, U.S. Government Printing Office.

(*12*) U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. *Nurses in Public Health, January 1, 1966*. PHS Publication No. 786 (Revised 1967). Washington, U.S. Government Printing Office.

(*13*) U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. *Report on Nursing Care of the Sick at Home*. August 1961. PHS Publication No. 901. Washington, U.S. Government Printing Office.

(*14*) U.S. Department of Health, Education, and Welfare, Public Health Service. *Toward Quality in Nursing, Needs and Goals: Report of the Surgeon General's Consultant Group on Nursing*. February, 1963. PHS Publication No. 992. Washington, U.S. Government Printing Office.

Appendix

277-908 O - 68 - 6

Table 14.—Distribution of U.S. population, by availability of nursing services for care of the sick at home, January 1, 1966

Population range	Total		U.S. population			
			With services available		Without services available	
	Number in millions [1]	Percent	Number in millions	Percent	Number in millions	Percent
Total	179.3	100.0	124.3	69.3	55.0	30.7
25,000 and over	79.8	44.5	73.0	40.7	6.8	3.8
2,500 to 25,000	34.9	19.5	20.1	11.2	14.8	8.3
Less than 2,500	64.6	36.0	31.2	17.4	33.4	18.6

---

[1] U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. Number of Inhabitants, United States Summary. Final Report PC(1)–A, pp. 1–13 Washington, U.S. Government Printing Office.

Table 15.—Counties in the United States with services for nursing care of the sick at home, January 1, 1966

PHS Regions	All Counties (U.S.)	Counties with nursing services available							
		1963 [1]				1966			
		Complete	Partial	Total with services		Complete	Partial	Total with services	
				Number	Percent			Number	Percent
Total	3,134	327	244	571	18.2	694	150	844	26.9
Region I	67	1	56	57	85.1	24	36	60	89.6
Region II	153	68	42	110	71.9	130	22	152	99.3
Region III	430	74	11	85	19.8	123	3	126	29.3
Region IV	516	50	22	72	14.0	138	2	140	27.1
Region V	436	72	57	129	29.6	100	50	150	34.4
Region VI	619	17	26	43	6.9	69	14	83	13.4
Region VII	502	7	7	14	2.8	43	6	49	9.8
Region VIII	218	14	2	16	7.3	27	3	30	13.8
Region IX	193	24	21	45	23.3	40	14	54	28.0

---

[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. Availability of Services for Nursing Care of the Sick at Home. July 1963. PHS Publication No. 1265, p. 18. Washington, U.S. Government Printing Office.

Table 16.—Cities of 25,000 population and over with nursing care of the sick at home services, by population range, 1961, 1963, 1966

Population range	All cities[1]	Cities with nursing services					
		1961		1963		1966	
		Number	Percent	Number	Percent	Number	Percent
Total	676	470	69.5	509	75.3	[2] 542	80.2
100,000 and over	130	112	86.2	117	90.0	118	90.8
50,000 to 100,000	180	137	76.1	149	82.8	155	86.1
25,000 to 50,000	366	221	60.4	243	66.4	269	73.5

[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. Availability of Services for Nursing Care of the Sick at Home, July 1963. PHS Publication No. 1265, p. 7. Washington, U.S. Government Printing Office.

[2] Includes 20 cities with limited service, 3 of which are in the 50,000 to 100,000 range and 17 in the 25,000 to 50,000 range.

Table 17.—Distribution of programs for nursing care of the sick at home, by type of agency, January 1, 1966

Type of agency	Nursing care of sick programs			
	Unlimited coverage	Limited coverage	Total	
			Number	Percent
All agencies	1,262	198	1,460	100.0
Official	492	180	672	46.0
Visiting nurse association	649	—	649	44.5
Combination	85	—	85	5.8
Other nonofficial	36	18	54	3.7

Table 18.—Distribution of all public health agencies and of those providing nursing care of the sick at home, by type of agency and nursing personnel, January 1, 1966

Type of agency	Local public health agencies[1][2]			Services for nursing care of sick at home					
	Agencies	Nursing personnel		Agencies		Nursing personnel			
						RN's		LPN's	
		RN's	LPN's	Number	Percent	Number	Percent	Number	Percent
Total	3, 363	23, 738	841	1, 460	43. 4	13, 261	55. 9	557	66. 2
Official	2, 503	16, 562	417	672	26. 8	6, 270	37. 9	135	32. 4
Visiting nurse association	651	4, 607	313	649	99. 6	4, 609	100. 0	311	99. 4
Combination	85	2, 210	95	85	100. 0	2, 210	100. 0	95	100. 0
Other nonofficial	124	359	16	54	43. 5	172	47. 9	16	100. 0

---

[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. Nurses in Public Health, Jan. 1, 1966. PHS Publication No. 785 (Revised 1966) p. 10. Washington, U.S. Government Printing Office.

[2] Excludes local boards of education.

Table 19.—Percentage of professional nurses (full and part time) employed in public health, providing nursing services for care of the sick at home, by State, January 1, 1966 [1] [2]

State	Percent	State	Percent
Alabama	55. 4	Montana	19. 7
Alaska	0. 0	Nebraska	76. 6
Arizona	14. 6	Nevada	26. 5
Arkansas	44. 3	New Hampshire	67. 5
California	64. 9	New Jersey	57. 9
Colorado	81. 5	New Mexico	23. 7
Connecticut	79. 6	New York	67. 6
Delaware	83. 1	North Carolina	57. 8
District of Columbia	100. 0	North Dakota	14. 7
Florida	81. 4	Ohio	65. 3
Georgia	35. 4	Oklahoma	37. 0
Hawaii	4. 4	Oregon	28. 9
Idaho	80. 3	Pennsylvania	72. 9
Illinois	45. 3	Rhode Island	97. 2
Indiana	35. 4	South Carolina	70. 3
Iowa	76. 1	South Dakota	0. 0
Kansas	42. 3	Tennessee	82. 3
Kentucky	44. 6	Texas	18. 8
Louisiana	24. 5	Utah	17. 5
Maine	88. 2	Vermont	44. 9
Maryland	64. 6	Virginia	35. 0
Massachusetts	60. 6	Washington	66. 3
Michigan	46. 8	West Virginia	28. 1
Minnesota	91. 4	Wisconsin	25. 0
Mississippi	0. 0	Wyoming	40. 0
Missouri	29. 5	Total	55. 9

---

[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing, Nurses in Public Health, Jan. 1, 1966. PHS Publication No. 785 (Revised 1966) p. 17. Washingtin, U.S. Government Printing Office.

[2] Excludes boards of education.

Table 20.—Distribution of agencies providing nursing care of the sick at home, by size of nursing staff, January 1, 1966

Staff size	Number of agencies providing services				
	All agencies [1]	Official	Visiting nurse association	Combination	Other non-official
Total	1,460 (100.0)	672	649	85	54
1	344 (23.5)	164	151	2	27
2 to 4	491 (33.6)	230	225	17	19
5 to 9	315 (21.6)	133	161	16	5
10 to 24	204 (14.0)	98	83	21	2
25 to 49	52 (3.5)	22	15	14	1
50 to 99	36 (2.5)	16	9	11	—
100 and more	18 (1.3)	9	5	4	—

[1] Numbers in parentheses indicate percent.

Table 21.—Proportion of local public health agencies with services available for nursing care of the sick by size of full-time nursing staff

Staff size	All agencies employing nurses full time for public health [1] [2]	Agencies providing nursing care of the sick at home	
		Number	Percent
Total	3,363	1,460	43.4
No full-time nurses	118	70	37.2
1	1,195	401	33.6
2 to 4	1,055	444	42.1
5 to 9	473	268	56.7
10 to 24	302	182	60.3
25 and over	150	95	63.6

---

[1] U.S. Department of Health, Education, and Welfare, Public Health Service, Division of Nursing. Nurses in Public Health, January 1966. PHS Publication No. 785. p. 20. Washington, U.S. Government Printing Office.

[2] Excludes local boards of education.

Table 22.—Size of agency nursing staff providing nursing care of the sick at home, by Public Health Service Region, January 1, 1966

PHS Regions	All agencies	Size of nursing staff[1]						
		1	2–4	5–9	10–24	25–49	50–99	100 and over
Total	1, 460	344	491	315	204	52	36	18
I	461	197	177	56	24	3	3	1
II	314	48	101	85	54	15	5	6
III	116	14	37	22	30	2	8	3
IV	139	5	53	44	21	9	5	2
V	185	25	57	54	33	6	8	2
VI	98	38	32	14	8	5	1	—
VII	48	16	15	7	4	5	1	—
VIII	23	—	7	6	7	1	1	1
IX	76	1	12	27	23	6	4	3

[1] Includes RN's and LPN's, full and part time.

Table 23.—Number of nursing personnel and ratio to U.S. population having nursing care of the sick at home services available, January 1, 1966

State (by PHS Region)	Population with services	Nurses employed to provide nursing care of sick at home	Nurse: population ratio
Total	124, 260, 895	13, 147	1:9, 452
Region I:			
Connecticut	2, 464, 051	570	4, 323
Maine	969, 265	127	7, 632
Massachusetts	5, 049, 705	692	7, 297
New Hampshire	421, 611	81	5, 205
Rhode Island	859, 488	171	5, 026
Vermont	150, 393	31	4, 581
Region II:			
Delaware	446, 292	59	7, 564
New Jersey	5, 856, 511	553	10, 590
New York	16, 744, 502	1, 908	8, 776
Pennsylvania	10, 447, 920	909	11, 494
Region III:			
District of Columbia	763, 956	187	4, 085
Kentucky	1, 669, 849	159	10, 502
Maryland	2, 915, 425	559	5, 215
North Carolina	2, 005, 844	376	5, 335
Virginia	1, 880, 976	206	9, 131
West Virginia	518, 552	36	14, 404
Region IV:			
Alabama	1, 415, 762	159	8, 904
Florida	4, 782, 095	716	6, 679
Georgia	1, 316, 313	234	5, 625
Mississippi	(1)	(1)	(1)
South Carolina	1, 710, 880	182	9, 400
Tennessee	2, 442, 452	359	6, 803
Region V:			
Illinois	7, 664, 611	420	18, 249
Indiana	2, 118, 188	140	15, 130
Michigan	6, 535, 009	437	14, 954
Ohio	7, 111, 698	754	9, 432
Wisconsin	2, 225, 343	166	13, 406
Region VI:			
Iowa	1, 278, 271	127	10, 065
Kansas	684, 419	69	9, 919
Minnesota	2, 642, 907	222	11, 905
Missouri	2, 408, 849	98	24, 580
Nebraska	343, 490	36	9, 541
North Dakota	46, 662	10	4, 666
South Dakota	(1)	(1)	(1)

See footnote at end of table.

Table 23.—Number of nursing personnel and ratio to U.S. population having nursing care of the sick at home services available, January 1, 1966—Continued

State (by PHS Region)	Population with services	Nurses employed to provide nursing care of sick at home	Nurse: population ratio
Region VII:			
Arkansas	820, 138	66	12, 426
Louisiana	808, 773	74	10, 929
New Mexico	307, 169	27	11, 377
Oklahoma	886, 454	78	11, 365
Texas	3, 203, 597	118	27, 149
Region VIII:			
Colorado	1, 256, 693	242	5, 193
Idaho	299, 166	49	6, 105
Montana	67, 508	14	4, 822
Utah	300, 198	27	11, 118
Wyoming	71, 160	10	7, 116
Region IX:			
Alaska	(1)	(1)	(1)
Arizona	736, 453	30	24, 548
California	14, 511, 582	1, 292	11, 232
Hawaii	294, 194	5	58, 839
Nevada	91, 611	13	7, 047
Oregon	846, 544	79	10, 716
Washington	1, 868, 366	270	6, 920
Guam	67, 044	21	3, 193
Puerto Rico	2, 349, 544	58	40, 509
Virgin Islands	31, 174	35	891

---

[1] No service reported.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
UNITED STATES	179, 323, 175	69. 3	542	118	155	269	134	36	97
Counties: total *3,134*									
Without services *2,290*									
With services *844*									
Alabama	3, 266, 740	43. 3	6	2	2	2	8	2	6
Counties: total *67*									
Without services *50*									
With services *17*									
CLAY	12, 400	100							
COLBERT	46, 506	100							
CONECUH	17, 762	100							
ESCAMBIA	33, 511	100							
ETOWAH	96, 980	100			Gadsden				
FRANKLEN	21, 988	100							
JEFFERSON*	634, 864	100		Birmingham		Bessemer			
LAMAR	14, 271	100							
LAUDERDALE	61, 622	100				Florence			
MARENGO	27, 098	100							
MARION	21, 837	100							
MOBILE	314, 301	64. 5		Mobile					
PIKE	25, 987	100							
SUMTER	20, 041	100							
TUSCALOOSA	109, 047	100			Tuscaloosa				
WALKER	54, 211	100							
WINSTON	14, 858	100							
Alaska	226, 167	0	0	0	0	0	1	0	1
Counties: total *24*									
Without services *24*									
With services *0*									
Arizona	1, 302, 161	56. 6	3	2	0	1	0	0	0
Counties: total *14*									
Without services *12*									
With services *2*									
MARICOPA	663, 510	78. 9		Phoenix		Mesa			
PIMA	265, 660	80. 1		Tucson					

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Arkansas	1, 786, 272	45. 9	3	1	1	1	3	1	2
Counties: total 75									
Without services 42									
With services 33									
ASHLEY*	24, 220	100							
BAXTER*	9, 943	100							
BENTON*	36, 272	100							
BOONE*	16, 116	100							
CONWAY*	15, 430	100							
CRAWFORD*	21, 318	100							
DESHA*	20, 770	100							
DREW*	15, 213	100							
FAULKNER*	24, 303	100							
GARLAND*	46, 697	100				Hot Springs*			
Howard*	10, 878	100							
JACKSON*	22, 843	100							
LINCOLN*	14, 447	100							
LONOKE*	24, 551	100							
MARION*	6, 041	100							
MONTGOMERY*	5, 370	100							
NEWTON*	5, 963	100							
OUACHITA*	31, 641	100							
PERRY*	4, 927	100							
PIKE*	7, 864	100							
POPE*	21, 177	100							
PULASKI	242, 980	100		Little Rock	North Little Rock				
RANDOLPH*	12, 520	100							
SALINE*	28, 956	100							
SCOTT*	7, 297	100							
SEARCY*	8, 124	100							
SHARP*	6, 319	100							
STONE*	6, 294	100							
VAN BUREN*	7, 228	100							
WASHINGTON*	55, 797	100							
WHITE*	32, 745	100							
WOODRUFF*	13, 954	100							
YELL*	11, 940	100							

California	15, 717, 204	92. 3	84	14	26	44	2	1	1
Counties: total 58									
Without services 26									
With services 32									
ALAMEDA	908, 209	100		Berkeley	Alameda	Fremont			
				Oakland	Hayward				
					San Leandro				
BUTTE	82, 030	100							
CONTRA COSTA	409, 030	100			Richmond	Concord			
						El Cerrito			
FRESNO	365, 945	100		Fresno					
IMPERIAL*	72, 105	100							
KERN	291, 984	100			Bakersfield				
KINGS	49, 954	100							
LOS ANGELES	6, 038, 771	100		Glendale	Alhambra	Arcadia			
				Long Beach	Burbank	Baldwin Park			
				Los Angeles	Compton	Bellflower			
				Pasadena	Downey	Beverly Hills			
				Torrance	Inglewood	Culver City			
					Lakewood	Gardena			
					Norwalk	Hawthorne			
					Pomona	Huntington Park			
					Santa Monica	Lynwood			
					South Gate	Manhattan Beach			
					West Covina	Monrovia			
						Monterey Park			
						Montebello			
						Paramount			
						Pico Rivera			
						Redondo Beach			
						Whittier			
MERCED	90, 446	100							
MONTEREY*	198, 351	100				Salinas*			
NAPA	65, 890	100							
NEVADA	20, 911	100							
ORANGE	703, 925	100		Anaheim	Fullerton	Buena Park			
				Santa Ana	Garden Grove	Costa Mesa			
						La Habra			
						Newport Beach			
						Orange			
						Westminster			
PLACER	56, 998	41. 6							
PLUMAS*	11, 620	100							
RIVERSIDE	306, 191	100			Riverside				
SACRAMENTO	502, 778	70. 8		Sacramento					
SAN BERNARDINO	503, 591	100			San Bernardino	Ontario			
						Redlands			
SAN DIEGO	1, 033, 011	100		San Diego		Chula Vista			
						El Cajon			
						La Mesa			
						National City			
SAN FRANCISCO	740, 316	100		San Francisco					
SAN JOAQUIN	249, 989	100			Stockton				
SAN LUIS OBISPO	81, 044	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
California—Continued									
San Mateo	444, 387	100			San Mateo	Daly City Menlo Park Redwood City San Bruno South San Francisco			
Santa Barbara	168, 962	49. 0			Santa Barbara				
Santa Clara	642, 315	100		San Jose	Palo Alto Santa Clara Sunnyvale	Mountain View			
Santa Cruz	84, 219	100				Santa Cruz			
Sonoma	147, 375	100				Santa Rosa			
Stanislaus	157, 294	100				Modesto			
Sutter	33, 380	100							
Tulare	168, 403	49. 7							
Ventura	199, 138	100				Oxnard San Buenaventura			
Yuba	33, 859	100							
Colorado	1, 753, 947	71. 6	6	1	2	3	2	0	2
Counties: total 63									
Without services 49									
With services 14									
Adams	120, 296	100							
Arapahoe	113, 426	100				Aurora Englewood			
Archuleta	2, 629	100							
Boulder	74, 254	100				Boulder			
Denver	493, 887	100		Denver					
Dolores	2, 196	100							
El Paso	143, 742	100			Colorado Springs				
Huerfano*	7, 867	100							
Jefferson	127, 520	100							
Laplata	19, 225	100							
Las Animas*	19, 983	100							
Moffat	7, 061	100							
Pueblo	118, 707	100			Pueblo				
Routt	5, 900	100							

Connecticut	2, 535, 234	97. 2	14	4	4	6	0	0	0
Counties: total 8									
Without services 0									
With services 8									
FAIRFIELD	653, 589	99. 5		Bridgeport	Norwalk				
					Stamford				
HARTFORD	689, 555	98. 9		Hartford	New Britain	Bristol			
LITCHFIELD	119, 856	96. 4				Torrington			
MIDDLESEX	88, 865	88. 2				Middletown			
NEW HAVEN	660, 315	99. 7		New Haven	Meriden	Milford			
				Waterbury					
NEW LONDON	185, 745	88. 8				New London			
						Norwich			
TOLLAND	68, 737	92. 3							
WINDHAM	68, 572	74. 9							
Delaware	446, 292	100	1	0	1	0	0	0	0
Counties: total 3									
Without services 0									
With services 3									
KENT	65, 651	100							
NEW CASTLE	307, 446	100			Wilmington				
SUSSEX	73, 195	100							
District of Columbia	763, 956	100	1	1	0	0	0	0	0
Counties: total 1									
Without services 0									
With services 1									
WASHINGTON	763, 956	100		Washington					
Florida	4, 951, 560	96. 6	21	4	6	11	1	0	1
Counties: total 67									
Without services 9									
With services 58									
ALACHUA	74, 074	100				Gainesville			
BAKER	7, 363	100							
BRADFORD	12, 446	100							
BREVARD	111, 435	100							
BROWARD	333, 946	100			Ft. Lauderdale	Hollywood			
CALHOUN	7, 422	100							
CHARLOTTE	12, 594	100							
CITRUS*	9, 268	100							
CLAY	19, 535	100							
COLLIER	15, 753	58. 0							
COLUMBIA*	20, 077	100							
DADE	935, 047	100		Miami	Hialeah	Coral Gables			
					Miami Beach	North Miami			
DE SOTO*	11, 683	100							
DIXIE	4, 479	100							
DUVAL	455, 411	100		Jacksonville					
ESCAMBIA	173, 829	100			Pensacola				
FLAGLER	4, 566	100							
GADSDEN*	41, 989	100							
GILCHRIST	2, 868	100							
GLADES	2, 950	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] State and County		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Florida—Continued									
GULF*	9, 937	100							
HAMILTON	7, 705	100							
HARDEE	12, 370	100							
HENDRY	8, 119	100							
HERNANDO*	11, 205	100							
HIGHLANDS	21, 338	100							
HILLSBOROUGH	397, 788	100		Tampa					
INDIAN RIVER	25, 309	100							
JACKSON*	36, 208	100							
JEFFERSON*	9, 543	100							
LAKE*	57, 383	100							
Lee*	54, 539	100							
Leon	74, 225	100				Tallahassee			
LEVY	10, 364	100							
MADISON*	14, 154	100							
MANATEE	69, 168	100							
MARION	51, 616	100							
MARTIN*	16, 932	100							
MONROE*	47, 921	100				Key West			
OKALOOSA	61, 175	100							
ORANGE	263, 540	100			Orlando				
OSCEOLA*	19, 029	100							
PALM BEACH	228, 106	100			West Palm Beach				
PINELLAS	374, 665	100		St. Petersburg		Clearwater			
POLK	195, 139	100				Lakeland			
PUTNAM	32, 212	100							
ST. JOHNS*	30, 034	100							
ST. LUCIE	39, 294	100				Fort Pierce			
SANTA ROSA	29, 547	100							
SARASOTA	76, 895	100				Sarasota			
SEMINOLE	54, 947	100							
SUWANNEE	14, 961	100							
TAYLOR*	13, 168	100							
UNION*	6, 043	100							
VOLUSIA	125, 319	100				Daytona Beach			
WAKULLA*	5, 257	100							
WALTON	15, 576	100							
WASHINGTON*	11, 249	100							

Georgia	3, 943, 116	33. 4	5	3	0	2	6	3	3
Counties: total 159									
Without services 153									
With services 6									
CHATHAM	188, 299	100		Savannah					
COBB	114, 174	100				Marietta			
DE KALB	256, 782	100							
FULTON	556, 326	100		Atlanta		East Point			
MUSCOGEE	158, 623	100		Columbus					
WHITFIELD*	42, 109	100							
Hawaii	632, 772	46. 5	1	1	0	0	1	0	1
Counties: total 5									
Without services 4									
With services 1									
HONOLULU	500, 409	58. 8		Honolulu					
Iaho	667, 191	44. 8	3	0	0	3	0	0	0
Counties: total 45									
Without services 37									
With services 8									
ADA	93, 460	100				Boise City			
BANNOCK*	49, 342	100				Pocatello*			
BENEWAH	6, 036	100							
BONNER	15, 587	100							
BONNEVILLE*	46, 906	77. 3				Idaho Falls*			
KOOTENAI	29, 556	100							
NEZ PERCE	27, 066	100							
TWIN FALLS*	41, 842	100							
Illinois	10, 081, 158	76. 0	39	3	12	24	2	0	2
Counties: total 102									
Without services 70									
With services 32									
ADAMS	68, 467	78. 4		Rockford		Quincy			
ALEXANDER	16, 061	100							
CHAMPAIGN	132, 436	58. 0				Champaign			
						Urbana			
CLINTON	24, 029	4. 1							
COOK*	5, 129, 725	100		Chicago	Berwyn	Arlington Heights			
					Cicero*	Calumet			
					Evanston	Chicago Heights*			
					Oak Park	Des Plaines			
					Skokie	Harvey*			
						Maywood			
						Oak Lawn*			
						Park Forest			
						Park Ridge*			
						Wilmette			
DU PAGE	313, 459	100				Elmhurst			
HARDIN*	5, 879	100							
HENRY	49, 317	33. 1							
JOHNSON*	6, 928	100							
KANE	208, 246	53. 0			Aurora	Elgin*			
KNOX	61, 280	60. 8				Galesburg			
LAKE	293, 656	100			Waukegan	Highland Park			

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] State and County		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Illinois—Continued									
La Salle	110, 800	60. 6							
Lee	38, 749	100							
McLean*	83, 877	100				Bloomington*			
Macon	118, 257	100			Decatur				
Madison	224, 689	73. 1				Alton Granite City			
Massac*	14, 341	100							
Morgan	36, 571	100							
Peoria	189, 044	62. 8		Peoria					
Pope*	4, 061	100							
Pulaski	10, 490	100							
Rock Island	150, 991	82. 6			Rock Island	Moline			
St. Claire	262, 509	85. 5			East St. Louis	Belleville			
Sangamon	146, 539	100			Springfield				
Stephenson	46, 207	100				Freeport			
Tazewell	99, 789	21. 6							
Union	17, 645	100							
Vermilion	96, 176	43. 5				Danville			
Will*	191, 617	100			Joliet				
Winnebago	209, 765	63. 1							
Woodford	24, 579	1. 2							
Indiana	4, 662, 498	45. 4	13	5	3	5	6	1	5
Counties: total 92									
Without services 76									
With services 16									
Allen*	232, 196	100		Fort Wayne					
Bartholomew*	49, 198	100							
Crawford	8, 379	100							
Delaware	110, 938	100			Muncie				
Franklin*	17, 015	100							
Howard*	69, 509	100				Kokomo*			
Johnson*	43, 704	100							
Lake	513, 269	46. 0		Gary	East Chicago				
Madison	125, 819	10. 5							
Marion	697, 567	100		Indianapolis					
Monroe	59, 225	100				Bloomington			
St. Joseph	238, 614	75. 3		South Bend		Mishawaka			
Tippecanoe	89, 122	100				Lafayette			
Vanderburgh	165, 794	100		Evansville					
Vigo	108, 458	66. 8			Terre Haute				
Wayne	74, 039	100				Richmond			

Iowa	2, 757, 537	46. 4	13	1	6	6	1	0	1
Counties: total 99									
Without services 78									
With services 21									
APPANOOSE*	16, 015	100							
BLACK HAWK*	122, 482	100			Waterloo				
BOONE	28, 037	44. 5							
CERRO GORDO	49, 894	61. 4				Mason City			
CLAY	°18, 504	100							
CLINTON	55, 060	61. 0				Clinton			
DES MOINES*	44, 605	100				Burlington			
DUBUQUE	80, 048	70. 7			Dubuque				
JOHNSON*	53, 663	100				Iowa City			
LEE	44, 207	71. 5							
LINN*	136, 899	100			Cedar Rapids				
MARSHALL	37, 984	59. 3							
MUSCATINE	33, 840	62. 0							
POLK*	266, 315	100		Des Moines					
POTTAWATTAMIE*	83, 102	100			Council Bluffs				
POWESHIEK	19, 300	38. 2							
SCOTT*	119, 067	100			Davenport				
WAPELLO	46, 126	100				Ottumwa			
WEBSTER	47, 810	59. 4				Fort Dodge			
WOODBURY	107, 849	100			Sioux City				
WRIGHT	19, 447	100							
Kansas	2, 178, 611	31. 4	3	3	0	0	4	0	4
Counties: total 105									
Without services 101									
With services 4									
CLOUD	14, 407	100							
SEDGWICK	343, 231	100		Wichita					
SHAWNEE	141, 286	100		Topeka					
WYANDOTTE	185, 495	100		Kansas City					
Kentucky	3, 038, 156	55. 0	4	1	2	1	4	0	4
Counties: total 120									
Without services 75									
With services 45									
BATH	9, 114	100							
BELL	35, 336	100							
BOONE	21, 940	100							
BOURBON	18, 178	100							
BRACKEN	7, 422	100							
BRECKINRIDGE	14, 734	100							
BUTLER	9, 586	100							
CAMPBELL	86, 803	100				Newport			
CHRISTIAN	56, 904	100							
CLARK	21, 075	100							
CLAY	20, 748	100							
FAYETTE	131, 906	100			Lexington				
GALLATIN	3, 867	100							
GRANT	9, 489	100							
HARDIN	67, 789	100							
HARRISON	13, 704	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Kentucky—Continued									
HENDERSON	33, 519	100							
JACKSON	10, 677	100							
JEFFERSON	610, 947	100		Louisville					
JESSAMINE*	13, 625	100							
KENTON	120, 700	100			Covington				
KNOTT	17, 362	100							
LARUE	10, 346	100							
LEE	7, 420	100							
LESLIE	10, 941	100							
LEWIS	13, 115	100							
LIVINGSTON	7, 029	100							
LOGAN	20, 836	100							
LYON	5, 924	100							
McCREARY	12, 463	100							
MASON	18, 454	100							
MENIFEE	4, 276	100							
MERCER	14, 596	100							
NICHOLAS	6, 677	100							
OWEN	8, 237	100							
OWSLEY	5, 369	100							
PENDLETON	9, 968	100							
PERRY*	34, 961	100							
PIKE*	68, 264	100							
ROBERTSON	2, 443	100							
RUSSELL	11, 076	100							
SCOTT	15, 376	100							
WEBSTER	14, 244	100							
WHITLEY	25, 815	100							
WOLFE	6, 534	100							
Louisiana	3, 257, 022	24. 8	1	1	0	0	8	4	4
Counties: total 64									
Without services 60									
With services 4									
JEFFERSON	208, 769	50. 0							
ORLEANS	627, 525	100		New Orleans					
ST. BERNARD	32, 186	50. 0							
TERREBONNE	60, 771	100							

Maine	969, 265	100	3	0	1	2	0	0	0
Counties: total 16									
Without services 0									
With services 16									
ANDROSCOGGIN*	86, 312	100				Lewiston*			
AROOSTOOK*	106, 064	100							
CUMBERLAND*	182, 751	100			Portland				
FRANKLIN*	20, 069	100							
HANCOCK*	32. 293	100							
KENNEBEC*	89, 150	100							
KNOX*	28, 575	100							
LINCOLN*	18, 497	100							
OXFORD*	44, 345	100							
PENOBSCOT*	126, 346	100				Bangor			
PISCATAQUIS*	17, 379	100							
SAGADAHOC*	22, 793	100							
SOMERSET*	39, 749	100							
WALDO*	22, 632	100							
WASHINGTON*	32, 908	100							
YORK*	99, 402	100							
Maryland	3, 100, 689	94. 0	4	1	0	3	0	0	0
Counties: total 24									
Without services 9									
With services 15									
ALLEGANY	84, 169	100				Cumberland			
ANNE ARUNDEL	206, 634	100							
BALTIMORE	492, 428	100							
BALTIMORE CITY	939, 024	100		Baltimore					
CARROLL	52, 785	100							
CECIL	48, 408	100							
DORCHESTER	29, 666	100							
FREDERICK	71, 930	100							
HARFORD	76, 722	100							
HOWARD	36, 152	100							
MONTGOMERY	340, 928	100				Rockville			
PRINCE GEORGES	357, 395	100							
ST. MARYS	38, 9 5	100							
WASHINGTON	91, 219	100				Hagerstown			
WICOMICO	49, 050	100							
Massachusetts	5, 148, 578	98. 1	35	5	14	16	0	0	0
Counties: total 14									
Without services 0									
With services 14									
BARNSTABLE	70, 286	98. 2							
BERKSHIRE	142, 135	86. 4			Pittsfield				
BRISTOL	398, 488	98. 0		New Bedford	Fall River	Attleboro Taunton			
DUKES	5, 829	98. 9							
ESSEX	568, 831	98. 7			Lawrence Lynn	Beverly Gloucester Haverhill Peabody Salem			

See footnotes at end of table.

2

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Massachusetts—Continued									
FRANKLIN	54, 864	83. 6							
HAMPDEN	429, 353	98. 9		Springfield	Chicopee Holyoke	Westfield			
HAMPSHIRE	103, 229	89. 7				Northampton			
MIDDLESEX	1, 238, 742	99. 4		Cambridge	Lowell Malden Medford Newton Somerville Waltham	Everett Melrose Woburn			
NANTUCKET	3, 449	100							
NORFOLK	510, 256	100			Quincy				
PLYMOUTH	248, 449	96. 5			Brockton				
SUFFOLK	791, 329	100		Boston		Chelsea Revere			
WORCESTER	583, 228	96. 2		Worcester		Fitchburg Leominster			
Michigan	7, 823, 194	83. 5	36	5	11	20	1	1	0
Counties: total 83									
Without services 36									
With services 47									
ALCONA	6, 352	100							
ALPENA*	28, 556	51. 4							
ARENAC	9, 860	100							
BARAGA	7, 151	100							
BAY	107, 042	100			Bay City				
BENZIE	7, 834	100							
BRANCH	34, 903	100							
CALHOUN	138, 858	93. 4				Battle Creek			
CHEBOYGAN*	14, 550	100							
CLARE	11, 647	100							
CRAWFORD	4, 971	100							
DELTA	34, 298	100							
DICKINSON	23, 917	100							
GENESEE	374, 313	100		Flint					

GLADWIN	10, 769	100							
GRAND TRAVERSE*	33, 490	50. 0							
HILLSDALE	34, 742	100							
HOUGHTON	35, 654	100							
INGHAM	211, 296	100		Lansing		East Lansing			
IOSCO	16, 505	100							
IRON	17, 184	100							
KALAMAZOO	169, 712	100			Kalamazoo				
KALKASKA	4, 382	100							
KENT	363, 187	100		Grand Rapids		Wyoming			
KEWEENAW	2, 417	100							
LEELANAU*	9, 321	50. 0							
LENAWEE	77, 789	100							
LIVINGSTON*	38, 233	100							
MACOMB	405, 804	100			Roseville	East Detroit			
					St. Claire Shores				
					Warren				
MARQUETTE	56, 154	48. 9							
MASON	21, 929	100							
MENOMINEE	24, 685	100							
MIDLAND	51, 450	100				Midland			
MONROE	101, 120	100							
MONTMORENCY*	4, 424	100							
MUSKEGON	149, 943	100				Muskegon			
OAKLAND	690, 259	100			Pontiac	Birmingham			
					Royal Oak	Ferndale			
						Hazel Park			
						Madison Heights			
						Oak Park			
						Southfield			
OGEMAW	9, 680	100							
ONTONAGON	10, 584	100							
OSCODA	3, 447	100							
OTTOWA	98, 719	100							
ROSCOMMON	7, 200	100							
SAGINAW	190, 752	100			Saginaw				
ST. CLAIR	107, 201	100				Port Huron			
ST. JOSEPH	42, 332	16. 8							
WASHTENAW	172, 440	100			Ann Arbor				
WAYNE	2, 666, 297	100		Dearborn	Lincoln Park	Allen Park			
				Detroit	Livonia	Garden City			
						Hamtramck			
						Highland Park			
						Inkster			
						Southgate			
						Wyandotte			

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Minnesota	3, 413, 864	77. 4	11	3	1	7	0	0	0
Counties: total 87									
Without services 38									
With services 49									
ANOKA	85, 916	100							
BENTON*	17, 287	100							
BIG STONE	8, 954	100							
BLUE EARTH*	44, 385	100							
CARLTON*	27, 932	100							
CASS*	16, 720	100							
CHIPPEWA*	16, 320	100							
CHISAGO*	13, 419	100							
COOK*	3, 377	100							
COTTONWOOD*	16, 166	100							
CROW WING*	32, 134	100							
DAKOTA*	78, 303	100							
DOUGLAS*	21, 313	100							
FILLMORE	23, 768	100							
GOODHUE	33, 035	100							
HENNEPIN	842, 854	99. 7		Minneapolis	Bloomington*	Edina Minnetonka Richfield St. Louis Park			
ISANTI*	13, 530	100							
ITASCA	38, 006	100							
KANDIYOHI	29, 987	100							
LE SUEUR*	19, 906	100							
LYON*	22, 655	100							
MCLEOD*	24, 401	100							
MARTIN*	26, 986	100							
MEEKER*	18, 887	100							
MILLE LACS*	14, 560	100							
MORRISON	26, 641	100							
MOWER	48, 498	100				Austin			
MURRAY*	14, 743	100							
NOBLES*	23, 365	100							
OLMSTED	65, 532	100				Rochester			
OTTER TAIL	48, 960	100							
PINE*	17, 004	100							

PIPESTONE*	13, 605	100							
RAMSEY	422, 525	100		St. Paul					
REDWOOD*	21, 718	100							
RENVILLE*	23, 249	100							
ST. LOUIS	231, 588	49. 2		Duluth					
SHERBURNE*	12, 861	100							
SIBLEY*	16, 228	100							
STEARNS*	80, 345	100				St. Cloud*			
STEELE	25, 029	100							
SWIFT	14, 936	100							
WADENA*	12, 199	100							
WASECA*	16, 041	100							
WASHINGTON*	52, 432	100							
WATONWAN*	14, 460	100							
WINONA	40, 937	60. 8							
WRIGHT*	29, 935	100							
YELLOW MEDICINE*	15. 523	100							
Mississippi	2, 178, 141	0	0	0	0	0	8	1	7
Counties: total 82									
Without services 82									
With services 0									
Missouri	4, 319, 813	55. 8	10	2	4	4	2	0	2
Counties: total 115									
Without services 108									
With services 7									
BUCHANAN	90, 581	100			St. Joseph				
CLAY*	87, 474	100							
COLE	40, 761	69. 3				Jefferson City			
GREENE	126, 276	100			Springfield				
JACKSON*	622, 732	100		Kansas City	Independence				
ST. LOUIS	703, 532	100			University City	Florissant Kirkwood Webster Groves			
ST. LOUIS CITY	750, 026	100		St. Louis					
Montana	674, 767	10. 0	1	0	0	1	3	2	1
Counties: total 57									
Without services 54									
With services 3									
MISSOULA	44, 663	100				Missoula			
RAVALLI	12, 341	100							
RICHLAND	10, 504	100							
Nebraska	1, 411, 330	24. 3	1	1	0	0	2	1	1
Counties: total 93									
Without services 92									
With services 1									
DOUGLAS	343, 490	100		Omaha					
Nevada	285, 278	32. 1	1	0	1	0	1	1	0
Counties: total 17									
Without services 15									
With services 2									
WASHOE	84, 743	98. 7			Reno				
WHITE PINE	9, 808	81. 7							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
New Hampshire	606, 921	69. 5	4	0	1	3	0	0	0
Counties: total 10									
Without services 0									
With services 10									
BELKNAP	28, 912	71. 7							
CARROLL	15, 829	27. 7							
CHESHIRE	43, 342	64. 7							
COOS	37, 140	71. 6							
GRAFTON	48, 857	60. 9							
HILLSBOROUGH	178, 161	84. 2			Manchester	Nashua			
MERRIMACK	67, 785	66. 2				Concord			
ROCKINGHAM	99, 029	50. 2				Portsmouth			
STRAFFORD	59, 799	72. 9							
SULLIVAN	28, 067	85. 0							
New Jersey	6, 066, 782	96. 5	36	6	8	22	0	0	0
Counties: total 21									
Without services 0									
With services 21									
ATLANTIC	160, 880	100			Atlantic City				
BERGEN	780, 255	96. 9				Bergenfield Hackensack Englewood Fair Lawn Garfield Ridgewood			
BURLINGTON	224, 499	100							
CAMDEN	392, 035	90. 7		Camden					
CAPE MAY	48, 555	65. 4							
CUMBERLAND	106, 850	100				Vineland			
ESSEX	923, 545	100		Newark	Bloomfield East Orange Irvington	Belleville Montclair Nutley Orange West Orange			
GLOUCESTER	134, 840	100							
HUDSON	610, 734	100		Jersey City	Bayonne Union City	Hoboken Kearny West New York			
HUNTERDON	54, 107	100							

MERCER	266, 392	100		Trenton					
MIDDLESEX	433, 856	100				New Brunswick			
						Perth Amboy			
Monmouth	334, 401	100				Long Branch			
MORRIS	261, 620	100							
OCEAN*	108, 241	100							
PASSAIC	406, 618	84. 8		Paterson	Clifton				
					Passaic				
SALEM	58, 711	38. 0							
SOMERSET	143, 913	100							
SUSSEX	49, 255	100							
UNION	504, 255	100		Elizabeth		Linden			
						Plainfield			
						Rahway			
						Westfield			
WARREN	63, 220	45. 2							
New Mexico	951, 023	32. 3	2	1	0	1	4	0	0
Counties: total 32									
Without services 30									
With services 2									
BERNALILLO	262, 199	100		Albuquerque					
SANTA FE	44, 970	100				Santa Fe			
New York	16, 782, 304	99. 8	32	8	7	17	0	0	0
Counties: total 62									
Without services 1									
With services 61									
ALBANY	272, 926	100		Albany					
ALLEGANY	43, 978	100							
BRONX	1, 424, 815	100							
BROOME	212, 661	100			Binghamton				
CATTARAUGUS	80, 187	100							
CAYUGA	73, 942	100				Auburn			
CHAUTAUQUA	145, 377	100				Jamestown			
CHEMUNG	98, 706	100				Elmira			
CHENANGO	43, 243	100							
CLINTON	72, 722	100							
COLUMBIA	47, 322	100							
CORTLAND	41, 113	100							
DELAWARE	43, 540	100							
DUTCHESS	176, 008	100				Poughkeepsie			
ERIE	1, 064, 688	100		Buffalo		Lackawanna			
ESSEX	35, 300	100							
FRANKLIN	44, 742	100							
FULTON	51, 304	100							
GENESEE	53, 994	100							
GREENE	31, 372	100							
HAMILTON	4, 267	100							
HERKIMER	66, 370	100							
JEFFERSON	87, 835	100				Watertown			
KINGS	2, 627, 319	100							
LEWIS	23, 249	100							
LIVINGSTON	44, 053	100							
MADISON	54, 635	100							
MONROE	586, 387	100		Rochester					
MONTGOMERY	57, 240	100				Amsterdam			

See footnotes at end of table.

Table 24.—Geographic distribution of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
New York—Continued									
NASSAU	1, 300, 171	100				Freeport Hempstead Long Beach Rockville Centre Valley Stream			
NEW YORK	1, 698, 281	100		New York City					
NIAGARA	242, 269	100		Niagara Falls		Lockport North Tonawanda			
ONEIDA	264, 401	100		Utica	Rome				
ONONDAGA	423, 028	100		Syracuse					
ONTARIO	68, 070	100							
ORANGE	183, 734	100				Newburgh			
ORLEANS	34, 159	100							
OSWEGO	86, 118	100							
OTSEGO	51, 942	100							
PUTNAM	31, 722	100							
QUEENS	1, 809, 578	100							
RENSSELAER	142, 585	100			Troy				
RICHMOND	221, 991	100							
ROCKLAND	136, 803	100							
ST. LAWRENCE	111, 239	100							
SARATOGA	89, 096	100							
SCHENECTADY	152, 896	100			Schenectady				
SCHOHARIE	22, 616	100							
SCHUYLER	15, 044	100							
SENECA	31, 984	100							
STEUBEN	97, 691	100							
SUFFOLK	666, 784	100							
SULLIVAN	45, 272	100							
TOMPKINS	66, 164	100				Ithaca			
ULSTER	118, 804	100				Kingston			
WARREN*	44, 002	100							
WASHINGTON	48, 476	100							
WAYNE	67, 989	100							
WESTCHESTER	808, 891	100		Yonkers	Mt. Vernon New Rochelle White Plains				
WYOMING	34, 793	100							
YATES	18, 614	100							

North Carolina	4, 556, 155	44. 0	9	3	3	3	5	1	4
Counties: total 100									
Without services 66									
With services 34									
ALAMANCE	85, 674	100				Burlington			
ALLEGHANY	7, 734	100							
ASHE	19, 768	100							
AVERY	12, 009	100							
BEAUFORT	36, 014	100							
BERTIE	24, 350	100							
BRUNSWICK	20, 278	100							
BURKE	52, 701	100							
CABARRUS	68, 137	100							
CAMDEN	5, 598	100							
CHATHAM	26, 785	100							
CHOWAN	11, 729	100							
CRAVEN	58, 773	100							
DURHAM	111, 995	100			Durham				
FORSYTH	189, 428	100		Winston-Salem					
GREENE	16, 741	100							
GUILFORD	246, 520	100		Greensboro	High Point				
HALIFAX	58, 956	100							
MECKLENBURG	272, 111	100		Charlotte					
NEW HANOVER	71, 742	100				Wilmington			
ORANGE	42, 970	100							
PASQUOTANK	25, 630	100							
PERQUIMANS	9, 178	100							
PERSON	26, 394	100							
PITT	69, 942	100							
POLK	11, 395	100							
RANDOLPH	61, 497	100							
RUTHERFORD	45, 091	100							
SURRY	48, 205	100							
TYRRELL	4, 520	100							
WAKE	169, 082	100			Raleigh				
WARREN	19, 652	100							
WATAUGA	17, 529	100							
WILSON	57, 716	100				Wilson			
North Dakota	632, 446	7. 4	1	0	0	1	3	0	3
Counties: total 53									
Without services 52									
With services 1									
CASS	66, 947	69. 7				Fargo			
Ohio	9, 706, 397	73. 3	34	8	10	16	6	0	6
Counties: total 88									
Without services 50									
With services 38									
ALLEN	103, 691	49. 2			Lima				
ASHLAND	38, 771	100							
ATHENS*	46, 998	100							
AUGLAIZE	36, 147	18. 7							
BUTLER	199, 076	57. 5			Hamilton	Middletown			
CLARK*	131, 440	62. 9			Springfield				
CLERMONT	80, 530	100							
CLINTON	30, 004	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] State and County		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Ohio—Continued									
COLUMBIANA	107, 004	15. 8							
CUYAHOGA	1, 647, 895	100		Cleveland	Cleveland Heights Euclid Lakewood Parma	East Cleveland Garfield Heights Maple Heights Shaker Heights South Euclid			
DEFIANCE	31, 508	100							
DELAWARE	36, 107	100							
FRANKLIN	682, 962	100		Columbus		Upper Arlington			
GREENE	94, 642	100							
HAMILTON	864, 121	100		Cincinnati		Norwood			
HOCKING*	20, 168	100							
JACKSON	29, 372	100							
JEFFERSON	99, 201	32. 8				Steubenville			
KNOX	38, 808	34. 2							
LAKE*	148, 700	100							
LAWRENCE*	55, 438	100							
LORAIN	217, 500	100			Lorain	Elyria			
LUCAS	456, 931	100		Toledo					
MAHONING	300, 480	87. 9		Youngstown					
MEIGS*	22, 159	100							
MONTGOMERY	527, 080	100		Dayton	Kettering				
MUSKINGUM	79, 159	49. 4				Zanesville			
PORTAGE*	91, 798	100							
PREBLE*	32, 498	100							
RICHLAND	117, 761	92. 3				Mansfield			
SENECA*	59, 326	57. 1							
STARK*	340, 345	100		Canton		Alliance Massillon			
SUMMIT	513, 569	100		Akron		Barberton Cuyahoga Falls			
TRUMBULL	208, 526	100			Warren				
TUSCARAWAS*	76, 789	81. 5							
UNION*	22, 853	100							
VINTON*	10, 274	100							
WASHINGTON*	51, 689	67. 4							

Oklahoma	2, 328, 284	38. 1	4	2	0	2	4	1	3
Counties: total 77									
Without services 73									
With services 4									
CARTER	39, 044	100							
MUSKOGEE	61, 866	100				Muskogee			
OKLAHOMA	439, 506	100		Oklahoma City		Midwest City			
TULSA	346, 038	100		Tulsa					
Oregon	1, 768, 687	47. 9	3	1	1	1	0	0	0
Counties: total 36									
Without services 28									
With services 8									
BENTON	39, 165	100							
CLACKAMAS	113, 038	100							
CLATSOP	27, 380	14. 2							
LANE*	162, 890	100			Eugene*				
MARION*	120, 888	100				Salem*			
MULTNOMAH	522, 813	71. 2		Portland					
TILLAMOOK	18, 955	10. 1							
YAMHILL	32, 478	100							
Pennsylvania	11, 319, 366	92. 3	26	5	9	12	0	0	0
Counties: total 67									
Without services 0									
With services 67									
ADAMS	51, 906	100							
ALLEGHENY	1, 628, 587	100		Pittsburgh		McKeesport West Mifflin Wilkinsburg			
ARMSTRONG	79, 524	100							
BEAVER	206, 948	100				Aliquippa			
BEDFORD	42, 451	100							
BERKS	275, 414	100			Reading				
BLAIR	137, 270	60. 0			Altoona				
BRADFORD	54, 925	100							
BUCKS	308, 567	100							
BUTLER	114, 639	100							
CAMBRIA	203, 283	60. 4			Johnstown				
CAMERON	7, 586	100							
CARBON	52, 889	22. 5							
CENTRE	78, 580	100							
CHESTER	210, 608	100							
CLARION	37, 408	100							
CLEARFIELD	81, 534	100							
CLINTON	37, 619	83. 0							
COLUMBIA	53, 489	100							
CRAWFORD	77, 956	77. 7							
CUMBERLAND	124, 816	100							
DAUPHIN	220, 255	100			Harrisburg				
DELAWARE	553, 154	100			Chester				
ELK*	37, 328	100							
Erie	250, 682	100		Erie					
FAYETTE	169, 340	100							
FOREST	4, 485	100							
FRANKLIN	88, 172	100							
FULTON	10, 597	100							
GREENE	39, 424	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Pennsylvania—Continued									
HUNTINGDON	39, 457	100							
INDIANA	75, 366	100							
JEFFERSON	46, 792	100							
JUNIATA	15, 874	100							
LACKAWANNA	234, 531	100		Scranton					
LANCASTER	278, 359	100			Lancaster				
LAWRENCE	112, 965	100				New Castle			
LEBANON	90, 853	100				Lebanon			
LEHIGH	227, 536	100		Allentown					
LUZERNE	346, 972	94. 5			Wilkes-Barre	Hazleton			
LYCOMING	109, 367	83. 2				Williamsport			
MCKEAN	54, 517	49. 3							
MERCER	127, 519	82. 6				Sharon			
MIFFLIN	44, 348	100							
MONROE	39, 567	100							
MONTGOMERY	516, 682	100				Norristown Pottstown			
MONTOUR	16, 730	100							
NORTHAMPTON	201, 412	93. 2			Bethlehem	Easton			
NORTHUMBERLAND	104, 138	39. 3							
PERRY	26, 582	100							
PHILADELPHIA	2, 002, 512	100		Philadelphia					
PIKE	9, 158	100							
POTTER	16, 483	100							
SCHUYLKILL	173, 027	43. 7							
SNYDER	25, 922	100							
SOMERSET	77, 450	100							
SULLIVAN	6, 251	100							
SUSQUEHANNA	33, 137	100							
TIOGA	36, 614	100							
UNION	25, 646	100							
VENANGO	65, 295	55. 1							
WARREN	45, 582	48. 9							
WASHINGTON	217, 271	35. 0							
WAYNE	28, 237	100							
WESTMORELAND	352, 629	38. 7							
WYOMING	16, 813	100							
YORK	238, 336	100			York				

Rhode Island	859, 488	100	7	1	3	3	0	0	0
Counties: total 5									
Without services 0									
With services 5									
BRISTOL	37, 146	100							
KENT	112, 619	100			Warwick				
NEWPORT	81, 891	100				Newport			
PROVIDENCE	568, 778	100		Providence	Cranston	East Providence			
					Pawtucket	Woonsocket			
WASHINGTON	59, 054	100							
South Carolina	2, 382, 594	71. 8	6	0	3	3	0	0	0
Counties: total 46									
Without services 24									
With services 22									
ABBEVILLE*	21, 417	100							
AIKEN*	81, 038	100							
ANDERSON	98, 478	100							
BEAUFORT*	44, 187	100							
CALHOUN*	12, 256	100							
CHARLESTON	216, 382	100			Charleston				
COLLETON*	27, 816	100							
FLORENCE*	84, 438	100							
GREENVILLE	209, 776	100			Greenville				
GREENWOOD*	44, 346	100							
HORRY*	68, 247	100							
LANCASTER*	39, 352	100							
LAURENS*	47, 609	100							
LEXINGTON	60, 726	100							
MARLBORO*	28, 529	100							
NEWBERRY*	29, 416	100							
OCONEE	40, 204	100							
PICKENS	46, 030	100							
RICHLAND	200, 102	100			Columbia	Anderson			
SPARTANBURG	156, 830	100				Spartanburg			
SUMTER*	74, 941	100							
YORK	78, 760	100				Rock Hill			
South Dakota	680, 514	0	0	0	0	0	2	1	1
Counties: total 67									
Without services 67									
With services 0									
Tennessee	3, 567, 089	68. 5	6	4	0	2	2	0	2
Counties: total 95									
Without services 58									
With services 37									
ANDERSON	60, 032	100				Oak Ridge			
BEDFORD	23, 150	100							
BENTON	10, 662	100							
BLOUNT	57, 525	100							
BRADLEY	38, 324	100							
CAMPBELL	27, 936	100							
CARTER	41, 578	100							
COCKE	23, 390	100							
CUMBERLAND	19, 135	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Tennessee—Continued									
DAVIDSON	399, 743	100		Nashville					
DYER	29, 537	100							
FENTRESS	13, 288	100							
GIBSON	44, 699	100							
GILES	22, 410	100							
GREENE	42, 163	100							
HAMBLEN	33, 092	100							
HAMILTON	237, 905	100		Chattanooga					
HENDERSON	16, 115	100							
JEFFERSON	21, 493	100							
KNOX	250, 523	100		Knoxville					
LINCOLN	23, 829	100							
MADISON	60, 655	100				Jackson			
MARSHALL	16, 859	100							
MONROE	23, 316	100							
MOORE	3, 454	100							
MORGAN	14, 304	100							
OBION	26, 957	100							
OVERTON	14, 661	100							
POLK	12, 160	100							
ROANE	39, 133	100							
ROBERTSON	27, 335	100							
RUTHERFORD	52, 368	100							
SEVIER	24, 251	100							
SHELBY*	627, 019	100		Memphis					
UNICOI	15, 082	100							
WARREN	23, 102	100							
WILLIAMSON	25, 267	100							
Texas	9, 579, 677	33. 4	8	5	2	1	32	14	18
Counties: total 254									
Without services 248									
With serices 6									
BEXAR	687, 151	88. 3		San Antonio					
DALLAS	951, 527	75. 5		Dallas					
GALVESTON	140, 364	47. 9			Galveston				
HARRIS	1, 243, 158	100		Houston	Pasadena	Baytown			
TARRANT	538, 495	66. 2		Fort Worth					
TRAVIS	212, 136	100		Austin					

Utah	890, 627	33. 7	2	1	1	0	1	0	1
Counties: total 29									
Without services 27									
With services 2									
SALT LAKE	383, 035	49. 5		Salt Lake City					
WEBER	110, 744	100			Ogden				
Vermont	389, 881	38. 6	1	0	0	1	0	0	0
Counties: total 14									
Without services 7									
With services 7									
BENNINGTON	25, 088	78. 4							
CALEDONIA	22, 786	49. 2							
CHITTENDEN	74, 425	57. 7				Burlington			
FRANKLIN	29, 474	21. 2							
WASHINGTON	42, 860	76. 0							
WINDHAM	29, 776	59. 5							
WINDSOR	42, 483	47. 1							
Virginia	3, 966, 949	47. 4	9	4	3	2	2	1	1
Counties: total 130									
Without services 104									
With services 26									
ALBEMARLE	30, 969	100							
ALEXANDRIA	91, 023	100			Alexandria				
ARLINGTON	163, 401	100							
BRISTOL CITY	17, 144	100							
CAMPBELL	32, 958	13. 3							
CAROLINE	12, 725	100							
CHARLOTTESVILLE	29, 427	100				Charlottesville			
CHESTERFIELD	71, 197	50. 0							
CULPEPER	15, 088	100							
DANVILLE	46, 577	100				Danville			
FAIRFAX	275, 002	100							
FREDERICKSBURG	13, 639	100							
GREENE	4, 715	100							
HAMPTON	89, 258	100			Hampton				
HANOVER	27, 550	100							
HENRICO	117, 339	100							
LUNENBURG	12, 523	100							
LYNCHBURG	54, 790	100			Lynchburg				
NEWPORT NEWS	113, 662	100		Newport News					
NORFOLK	305, 872	100		Norfolk					
ORANGE	12, 900	100							
PORTSMOUTH	114, 773	100		Portsmouth					
RICHMOND	219, 958	100		Richmond					
ROANOKE	61, 693	31. 6							
WASHINGTON	38, 076	100							
WINCHESTER	15, 110	100							

See footnotes at end of table.

Table 24.—Geographic distributions of population in the United States and Territories with nursing services available for care of the sick at home, January 1, 1966—Continued

STATE and COUNTY	Population [1] *State and County*		Cities with population 25,000 and over by range [2]						
			Nursing services available				Nursing services not available		
	Total	Percent with services	Number	100,000 and over	50,000 to 100,000	25,000 to 50,000	Number	50,000 and over	25,000 to 50,000
Washington	2, 853, 214	65. 5	7	3	0	4	1	0	1
Counties: total 39									
Without services 30									
With services 9									
CLARK*	93, 809	100				Vancouver*			
COWLITZ	57, 801	59. 2							
KING	935, 014	86. 5		Seattle					
KITSAP	84, 176	100				Bremerton			
PIERCE	321, 590	100		Tacoma					
SKAMANIA*	5, 207	100							
SNOHOMISH	172, 199	100				Everett			
SPOKANE*	278, 833	100		Spokane					
WHATCOM	70, 317	100				Bellingham			
West Virginia	1, 860, 421	27. 9	4	0	2	2	3	1	2
Counties: total 55									
Without services 50									
With services 5									
HARRISON	77, 856	100				Clarksburg			
KANAWHA	252, 925	100			Charleston				
MARION*	63, 717	100				Fairmont*			
MONONGALIA	55, 617	100							
OHIO	68, 437	100			Wheeling				
Wisconsin	3, 951, 777	56. 3	17	2	5	10	2	0	2
Counties: total 71									
Without services 54									
With services 17									
BROWN	125, 082	100			Green Bay				
CHIPPEWA	45, 096	27. 6							
COLUMBIA	36, 708	100							
DANE	222, 095	100		Madison					
EAU CLAIRE	58, 300	63. 9				Eau Claire			
FOND DU LAC	75, 085	43. 6				Fond Du Lac			
KENOSHA	100, 615	84. 8			Kenosha				
MANITOWOC	75, 215	100				Manitowoc			
MARATHON	88, 875	60. 1				Wausau			
MILWAUKEE	1, 036, 041	100		Milwaukee	Wauwatosa West Allis				

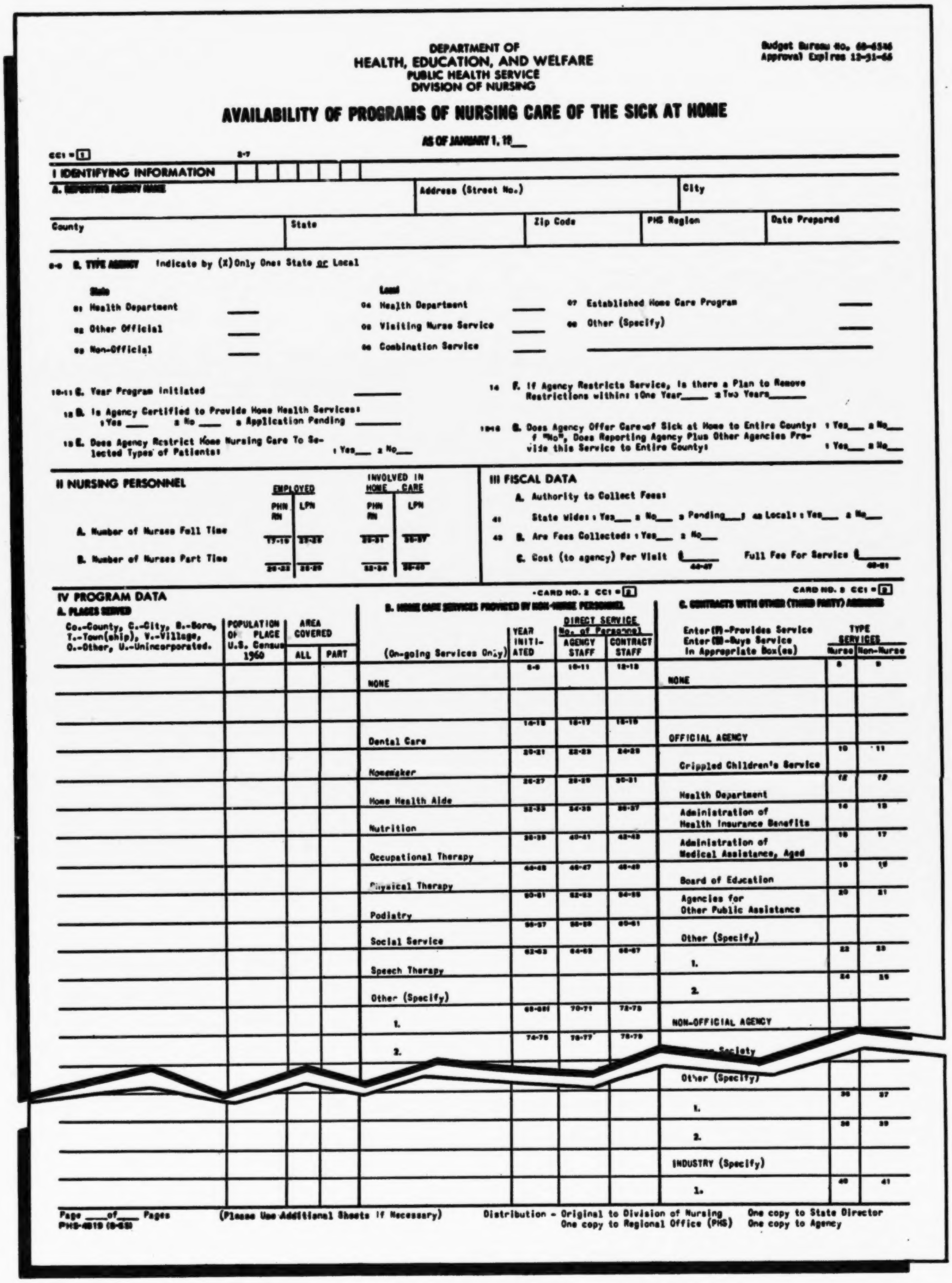
OUTAGAMIE	101, 794	45. 9				Appleton			
OZAUKEE	38, 441	48. 4							
RACINE	141, 781	80. 0			Racine				
ROCK	113, 913	71. 2				Beloit Janesville			
SHEBOYGAN	86, 484	68. 9				Sheboygan			
WAUKESHA	158, 249	63. 1				Waukesha			
WINNEBAGO	107, 928	83. 3				Oshkosh			
Wyoming	330, 066	21. 6	1	0	0	1	1	0	1
Counties: total 24									
Without services 21									
With services 3									
ALBANY	21, 290	100							
HOT SPRINGS*	6, 365	100							
LARAMIE	60, 149	72. 3				Cheyenne*			
Guam	67, 044	100							
Puerto Rico	2, 349, 544	100							
Virgin Islands	32, 099	97. 1							

---

[1] U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. Number of Inhabitants, State Volumes. Table 6. Washington, U.S. Government Printing Office.

[2] U.S. Department of Commerce, Bureau of the Census. U.S. Census of Population: 1960. Supplementary Reports. Population of Cities of 25,000 or More: 1960. Washington, U.S. Government Printing Office.

* Indicates some limited service.



DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
DIVISION OF NURSING

Budget Bureau No. 68-6346
Approval Expires 12-31-66

AVAILABILITY OF PROGRAMS OF NURSING CARE OF THE SICK AT HOME

AS OF JANUARY 1, 19__

CC1 = 1   2-7

I IDENTIFYING INFORMATION

A. REPORTING AGENCY NAME	Address (Street No.)	City

County	State	Zip Code	PHS Region	Date Prepared

8-9 **B. TYPE AGENCY** Indicate by (X) Only One: State or Local

State		Local			
01 Health Department	____	04 Health Department	____	07 Established Home Care Program	____
02 Other Official	____	05 Visiting Nurse Service	____	08 Other (Specify)	____
03 Non-Official	____	06 Combination Service	____	____	

10-11 C. Year Program Initiated ________

12 D. Is Agency Certified to Provide Home Health Services:
1 Yes ____ 2 No ____ 3 Application Pending ________

13 E. Does Agency Restrict Home Nursing Care To Selected Types of Patients: 1 Yes___ 2 No___

14 F. If Agency Restricts Service, Is there a Plan to Remove Restrictions within: 1 One Year____ 2 Two Years______

15-16 G. Does Agency Offer Care of Sick at Home to Entire County: 1 Yes___ 2 No___
If "No", Does Reporting Agency Plus Other Agencies Provide this Service to Entire County: 1 Yes___ 2 No___

II NURSING PERSONNEL

	EMPLOYED		INVOLVED IN HOME CARE	
	PHN RN	LPN	PHN RN	LPN
A. Number of Nurses Full Time	17-19	23-25	29-31	35-37
B. Number of Nurses Part Time	20-22	26-28	32-34	38-40

III FISCAL DATA

A. Authority to Collect Fees:

41 State Wide: 1 Yes___ 2 No___ 3 Pending___; 42 Local: 1 Yes___ 2 No___

43 B. Are Fees Collected: 1 Yes___ 2 No___

C. Cost (to agency) Per Visit $______ (44-47)   Full Fee For Service $______ (48-51)

IV PROGRAM DATA

•CARD NO. 2 CC1 = 2   CARD NO. 3 CC1 = 3

A. PLACES SERVED

Co.-County, C.-City, B.-Boro, T.-Town(ship), V.-Village, O.-Other, U.-Unincorporated.	POPULATION OF PLACE U.S. Census 1960	AREA COVERED	
		ALL	PART

B. HOME CARE SERVICES PROVIDED BY NON-NURSE PERSONNEL

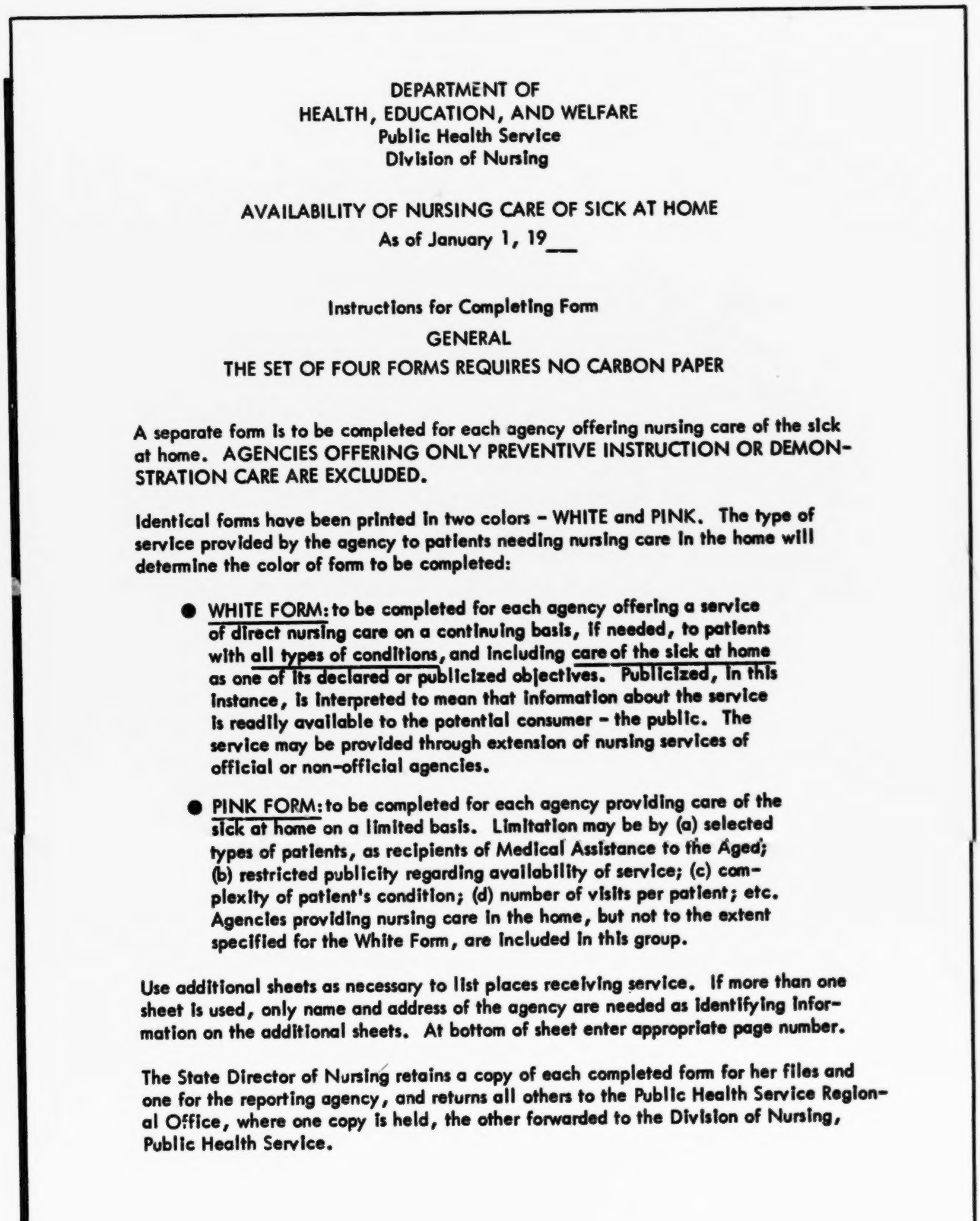
(On-going Services Only)	YEAR INITIATED	DIRECT SERVICE No. of Personnel	
		AGENCY STAFF	CONTRACT STAFF
NONE	8-9	10-11	12-13
Dental Care	14-15	16-17	18-19
Homemaker	20-21	22-23	24-25
Home Health Aide	26-27	28-29	30-31
Nutrition	32-33	34-35	36-37
Occupational Therapy	38-39	40-41	42-43
Physical Therapy	44-45	46-47	48-49
Podiatry	50-51	52-53	54-55
Social Service	56-57	58-59	60-61
Speech Therapy	62-63	64-65	66-67
Other (Specify)			
1.	68-69	70-71	72-73
2.	74-75	76-77	78-79

C. CONTRACTS WITH OTHER (THIRD PARTY) AGENCIES

Enter (P)-Provides Service Enter (B)-Buys Service In Appropriate Box(es)	TYPE SERVICES	
	Nurse	Non-Nurse
NONE	8	9
OFFICIAL AGENCY		
Crippled Children's Service	10	11
Health Department	12	13
Administration of Health Insurance Benefits	14	15
Administration of Medical Assistance, Aged	16	17
Board of Education	18	19
Agencies for Other Public Assistance	20	21
Other (Specify)		
1.	22	23
2.	24	25
NON-OFFICIAL AGENCY		
Society		
Other (Specify)		
1.	36	37
2.	38	39
INDUSTRY (Specify)		
1.	40	41

Page ____ of ____ Pages   (Please Use Additional Sheets If Necessary)   Distribution - Original to Division of Nursing; One copy to Regional Office (PHS); One copy to State Director; One copy to Agency

PHS-4819 (8-65)



DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
Public Health Service
Division of Nursing

AVAILABILITY OF NURSING CARE OF SICK AT HOME

As of January 1, 19__

Instructions for Completing Form

GENERAL

THE SET OF FOUR FORMS REQUIRES NO CARBON PAPER

A separate form is to be completed for each agency offering nursing care of the sick at home. AGENCIES OFFERING ONLY PREVENTIVE INSTRUCTION OR DEMONSTRATION CARE ARE EXCLUDED.

Identical forms have been printed in two colors - WHITE and PINK. The type of service provided by the agency to patients needing nursing care in the home will determine the color of form to be completed:

- WHITE FORM: to be completed for each agency offering a service of direct nursing care on a continuing basis, if needed, to patients with all types of conditions, and including care of the sick at home as one of its declared or publicized objectives. Publicized, in this instance, is interpreted to mean that information about the service is readily available to the potential consumer - the public. The service may be provided through extension of nursing services of official or non-official agencies.
- PINK FORM: to be completed for each agency providing care of the sick at home on a limited basis. Limitation may be by (a) selected types of patients, as recipients of Medical Assistance to the Aged; (b) restricted publicity regarding availability of service; (c) complexity of patient's condition; (d) number of visits per patient; etc. Agencies providing nursing care in the home, but not to the extent specified for the White Form, are included in this group.

Use additional sheets as necessary to list places receiving service. If more than one sheet is used, only name and address of the agency are needed as identifying information on the additional sheets. At bottom of sheet enter appropriate page number.

The State Director of Nursing retains a copy of each completed form for her files and one for the reporting agency, and returns all others to the Public Health Service Regional Office, where one copy is held, the other forwarded to the Division of Nursing, Public Health Service.

SPECIFIC

Item numbers correspond to those on the form.

I B. TYPE AGENCY

Use the following definitions; indicate by (X) only one: State or Local.

STATE

Health Department: a health agency supported by tax funds and administered by a unit of State government.

Other Official: An agency other than the State Health Department, supported by tax funds and administered by a unit of State government. (State Welfare Department, State Mental Health Commission, etc.).

Non-Official Agency: All voluntary State agencies: Tuberculosis Association, Junior League, religious groups, Red Cross, etc.

LOCAL

A multiple-county district or unit is considered to be one agency.

Health Department: A health agency supported primarily by tax funds, administered by a county, city or other local unit of government, and having as major responsibilities prevention and control of disease, and community education. It may or may not offer therapeutic nursing services.

Visiting Nurse Service: A voluntary (non-official) agency administered by a citizens' group, and usually financed by earnings and contributions, community chest, and united funds, which has as one of its primary functions the care of the sick at home.

Combination Service: Program administered jointly by a voluntary and an official agency, supported by tax funds, community chest and united funds, earnings and contributions, in which preventive and therapeutic services are rendered by a single staff of nurses. Include in this group integrated or amalgamated agencies.

Established Home Care Program: Program administered by agency other than VNA, combination or official agency in which nurses are employed to provide nursing care to patients in the home. Include "organized", group practice, hospital based, coordinated, industrial and other home care programs, regardless of location.

Other (Specify): Enter in this space any other type of agency offering nursing care of the sick at home. Explain if indicated.

I C. Year in which agency first provided nursing care of the sick at home.

D. Until enactment in 1965 of legislation authorizing care of the elderly in their homes, few states had designated agencies to certify service agencies offering care in the home. It is anticipated that a small number of service agencies will have been certified as meeting at least minimum specified standards during the first year following enactment of the law. If reporting agency has been certified, check "yes"; if application has been filed but processing is not completed, check "pending".

E. Some agencies restrict nursing care in the home to selected patients only, such as the blind, the recipient of Medical Assistance to the Aged, etc. If "yes", Pink Form rather than White Form should be prepared.

F. Many agencies anticipate expanding services, to assist in meeting demands engendered by Health Insurance Legislation. If reporting agency expects to offer direct care on a continuing basis if needed, to all types of patients, and to publicize availability of its services, indicate if this can be done within (1) one year, or (2) two years, after enactment (August 1965) of the Health Insurance Legislation.

G. All or part of a county may be served by one or by multiple agencies, which may be located within or outside of the county.

II NURSING PERSONNEL

A. Include under RN, all professional registered nurses, whether prepared in public health or not, working full time. Indicate total number of RN's and LPN's employed full time, and the number of each providing nursing care of the sick at home.

A full time employee works 35 hours or more per week, or whatever is accepted as the agency work week.

B. Enter the number of professional nurses and of LPN's employed on a part time basis, and the number of these providing nursing care of the sick in the home.

A part time employee is regularly employed, working less than the agency work week.

III FISCAL DATA

A. Some official health agencies require legislative authority to collect fees; the authority may be from statewide legislation, ruling by the State Attorney General, or local ordinance.

B. Some agencies authorized to collect fees do not use the authority. Are fees, in fact, collected?

C. Enter average cost to agency, and full fee charged by agency. These two figures may be the same, or there may be wide discrepancy between them.

IV A. PLACES SERVED

County or county equivalent (capital letters on White Form): primary division of state. The Bureau of the Census includes as county equivalents: election districts of Alaska; parishes of Louisiana; municipios of Puerto Rico; the 34 independent cities in the U.S. (Baltimore; St. Louis; 32 cities in Virginia); and the three parts of Yellowstone National Park in Idaho, Montana and Wyoming. For purposes of this report, the District of Columbia, Guam, Puerto Rico, American Samoa, and the Virgin Islands are treated as states.

Place: Named minor civil division of county or county equivalent; an incorporated or unincorporated concentration of population, with or without legally prescribed limits.

It is essential that a common statistical base be used; for that reason populations and definitions are those used by the U.S. Census Bureau. Do not change the figures given even though other population estimates may be available to you.

Letters in parenthesis after name of place are pre-codes for machine tabulation only.

> pt: Part of an incorporated or unincorporated place located in more than one civil division.
>
> ps: Reported population served by agency when one or more than one agency serves part of a place.
>
> other: This category is listed to account for the residual population not included in named places.

DELETE, CORRECT, OR ENTER additional names of places, regardless of size or political status, so that there is a complete listing of all places served by each agency.

> WHITE FORM: The list of places has been prepared by the Division of Nursing, from information collected previously. In some instances the list will need up-dating.
>
> PINK FORM: Information has not been collected previously for agencies providing care in the home on a restricted basis (see page 1). It will therefore be necessary to list on the Pink Form, each county or county equivalent, and each place (regardless of size or definition) within the county (or equivalent), which the reporting agency serves. Omit population data, with this exception:
>
> > If place served received only partial coverage by reporting agency, indicate the proportion of place and population served, and name of other agency(ies)providing service in the area.

IV B. HOME CARE SERVICES PROVIDED BY NON-NURSE PERSONNEL

The purpose of Section B is to obtain a record of the paramedical services provided by agency. Non-nurse personnel providing the services may be employed by the reporting agency or, by contract, from other agencies or persons.

Indicate year agency initiated each service, and total number of non-nurse personnel: (1) employed by reporting agency and (2) by contract. Numbers entered should represent the equivalents of full time personnel, such as: 1/2 physical therapist on agency staff, service of 3 1/2 home health aides purchased through contract, etc.

Most of the services listed are well established, and need no explanation. There may be questions about the two following; for purposes of this report, observe these definitions:

> Homemaker Service: That offered by one who maintains household routine and attempts to preserve or create wholesome family living in time of stress, but does not give personal care.
>
> Home Health Aide Service: That offered by a non-professional worker who, under nursing or medical supervision, provides personal care services that would normally be offered to the ill or disabled by a responsible adult family member; may include light housekeeping activities.

IV C. CONTRACTS

The purpose of Section C is not to list total sources of funds, but to indicate the demand made of the agency to provide nursing and allied services, and the need of the agency to supplement its own services from outside sources.

An agency may enter into a contract or agreement to provide or to buy service, or both, from third party agencies.

If the reporting agency either provides or purchases services in the home by nurse or non-nurse personnel through contract or agreement, indicate in appropriate column the agency with which a contract is negotiated and appropriate code:

Enter – P – to show that reporting agency provides (supplies, sells) service to another agency on a contract basis.

Enter – B – to show that reporting agency buys (purchases, obtains) service through contract from another agency.

IV C. CONTRACTS (continued)

Examples:

1. The Cancer Society (the buyer) has negotiated a contract with the V.N.A. (reporting agency) to have the V.N.A. provide home care services to cancer patients — nursing and physical therapy service. The Cancer Society pays the V.N.A. for this service.

Enter - P - under column "Nurse" opposite Cancer Society to indicate reporting agency provides nursing service for that agency.

Enter - P - under column "Non-Nurse" opposite Cancer Society to indicate reporting agency provides physical therapy service for that agency.

2. The Administration of Health Insurance Benefits (buyer) negotiates a contract with the health department (reporting agency) to provide (supply) nursing care, speech therapy and nutrition consultation in the home to HIB beneficiaries. In order to offer (provide) this broad service in the home, the health department (reporting agency) must buy (purchase) from the Board of Education, the part time services of a speech therapist.

Enter - P - under column "Nurse" opposite Administration of Health Insurance Benefits to indicate reporting agency provides service for HIB Administration.

Enter - B - under column "Non-Nurse" opposite Board of Education to indicate reporting agency buys service from that agency.

PLEASE DISREGARD ARABIC NUMBERS.
THESE ARE CODES FOR DATA PROCESSING

U. S. GOVERNMENT PRINTING OFFICE : 1968 O - 277-008